

Cincinnati Christian Athletics-Parent Evaluation Form

CCS Parent,

Thank you for taking a moment to respond the following questions. Please understand that these forms are one of the many ways we ask for and receive feedback regarding CCS Athletics and your thoughts, point of view, and opinions expressed below will help us to take something great and make it better.

Instructions:

- Please think carefully about the following questions, respond candidly and thoroughly, and feel free to attach additional pages if necessary. You may also offer additional comments about other areas in athletic not addressed in this survey.
- This survey can be returned “named” or anonymously. I sincerely hope you will decide to provide your name and contact information as a way of guaranteeing that we start a dialog and can be more responsive to your comments below.
- Families can fill out one or multiple forms. And they may fill out multiple forms throughout the year.
- This survey must be returned to the athletic office by fax, mail, or e-mail.
- It would be best of we got these forms back within two weeks of the end-of-season awards dinner but late forms will be accepted throughout the year.
- Please check the appropriate line(s) below.

_____I would like you to contact me to discuss issues relating to athletics.

_____I would like the following comments to remain confidential and only shared with the AD and administration.

_____Please share any/all of this information with the department staff.

Date:_____ Student's name:_____

Level of Sport (circle one) Varsity JV JH Elementary

Sport:_____ Parent's name:_____

Contact via (circle one): Phone E-mail Telephone:_____

E-mail:_____

Athletics Fax: (513) 892-0516

Mailing Address: CCS Athletics
7474 Morris Road
Cincinnati, OH 45011

E-mail Address: sgillens@cincinnatiathletics.org

On the following pages, please rank your experience this past season in each one of the following categories (1 poor; 2 below average; 3 average; 4 good; 5 excellent):

A. Head Coach Evaluation

Coach's name: _____

I. Communication

- Accessibility _____(1-5)
- Returns calls within 24-hours _____(1-5)
- Responds to email within 24 hours _____(1-5)
- Overall responsiveness _____(1-5)
- Clarity of expectations w/students _____(1-5)
- Clarity of expectations w/parents _____(1-5)

Please share any additional comments:

II Logistics

- Transportation _____(1-5)
- Facility _____(1-5)
- Games _____(1-5)
- Practices _____(1-5)

Please share any additional comments:

III Discipline

- Older Players _____(1-5)
- Younger Players _____(1-5)
- During practice _____(1-5)
- During game _____(1-5)
- During team functions _____(1-5)
- Fairness _____(1-5)

Please share any additional comments:

B. Assistant Coach Evaluation

Coach's name: _____

I. Communication

- Accessibility _____(1-5)
- Returns calls within 24-hours _____(1-5)
- Responds to email within 24 hours _____(1-5)
- Overall responsiveness _____(1-5)
- Clarity of expectations w/students _____(1-5)
- Clarity of expectations w/parents _____(1-5)

Please share any additional comments:

II Logistics

- Transportation _____(1-5)
- Facility _____(1-5)
- Games _____(1-5)
- Practices _____(1-5)

Please share any additional comments:

III Discipline

- Older Players _____(1-5)
- Younger Players _____(1-5)
- During practice _____(1-5)
- During game _____(1-5)
- During team functions _____(1-5)
- Fairness _____(1-5)

Please share any additional comments:

C Overall Athletic Program Evaluation

I. Communication

Ease of access	_____	(1-5)
Access via phone	_____	(1-5)
Access via e-mail	_____	(1-5)
Access to staff	_____	(1-5)
Staff returns calls	_____	(1-5)
Staff returns e-mails	_____	(1-5)
With Students	_____	(1-5)
Expectations	_____	(1-5)
Web site accuracy	_____	(1-5)
Web site usefulness	_____	(1-5)

Please share any additional comments:

II Personnel

On-campus coaches	_____	(1-5)
Off-campus coaches	_____	(1-5)
Head Coaches	_____	(1-5)
Assistant Coaches	_____	(1-5)

Please share any additional comments:

III Student support

Academics	_____	(1-5)
Other activities	_____	(1-5)
Scheduling	_____	(1-5)
Home games	_____	(1-5)
Away games	_____	(1-5)
Equipment	_____	(1-5)
Uniforms	_____	(1-5)
Facilities	_____	(1-5)

Please share any additional comments:
