

# Falmouth Youth Soccer Association

## Parent Feedback Form

Our mission in establishing this form is to collect information that will help us maintain a high standard of excellence in our coaching staff and improve the overall experience of our players. Your participation in this process is valuable. Thank you for taking the time to fill out this form.

Name (recommended but optional) \_\_\_\_\_ Date \_\_\_\_\_

- 1) How many years have you been involved in FYSA? \_\_\_\_\_
  - 2) How many children do you have in this program? \_\_\_\_\_ 3) Did your child have fun? \_\_\_\_\_
  - 3) Do you feel your child progressed as a player? \_\_\_\_\_
- 
- 5) How many games did your family attend? Circle one. None Few Most All

**Head/Co-Coach:** \_\_\_\_\_ **Division/Age:** Boys  
Girls U-\_\_\_\_

A) Please rate the coach as a communicator(to the children as well as the parents). This would include philosophy, expectation, team rules, and answering questions:

1. Excellent      2. Good      3. Average      4 Needs Improvement      5. Poor

B) Please rate the coach as a teacher. This would include practice sessions and game situations:

1. Excellent      2. Good      3. Average      4 Needs Improvement      5. Poor

C) Please rate the coach as a role model for sportsmanship:

1. Excellent      2. Good      3. Average      4 Needs Improvement      5. Poor

D) What is your overall evaluation of the coach?

1. Excellent      2. Good      3. Average      4 Needs Improvement      5. Poor

**1<sup>st</sup> Assistant/Co-Coach:** \_\_\_\_\_

Question A:    1. Excellent    2. Good    3. Average    4 Needs Improvement    5. Poor

Question B:    1. Excellent    2. Good    3. Average    4 Needs Improvement    5. Poor

Question C:    1. Excellent    2. Good    3. Average    4 Needs Improvement    5. Poor

Question D:    1. Excellent    2. Good    3. Average    4 Needs Improvement    5. Poor

**To evaluate additional assistant coaches, please see reverse side**

Please mail completed form by November 30, 2009 to

**FYSA, Parent Feedback Form, PO Box 66844, Falmouth, ME 04105**

**2nd Assistant/Co-Coach:** \_\_\_\_\_

Question A:	1. Excellent	2. Good	3. Average	4 Needs Improvement	5. Poor
Question B:	1. Excellent	2. Good	3. Average	4 Needs Improvement	5. Poor
Question C:	1. Excellent	2. Good	3. Average	4 Needs Improvement	5. Poor
Question D:	1. Excellent	2. Good	3. Average	4 Needs Improvement	5. Poor

**3rd Assistant/Co-Coach:** \_\_\_\_\_

Question A:	1. Excellent	2. Good	3. Average	4 Needs Improvement	5. Poor
Question B:	1. Excellent	2. Good	3. Average	4 Needs Improvement	5. Poor
Question C:	1. Excellent	2. Good	3. Average	4 Needs Improvement	5. Poor
Question D:	1. Excellent	2. Good	3. Average	4 Needs Improvement	5. Poor

**Comments:**

Please mail completed form by February 5, 2010  
**FYSA, Parent Feedback Form, PO Box 66844, Falmouth, ME 04105**  
 Or via email to [marsha@termhouse.com](mailto:marsha@termhouse.com)