

# LAMAR LITTLE LEAGUE

## CONFIDENTIAL MANAGER/COACH EVALUATION FORM

The Board of Directors of Lamar Little League would like to give each parent an opportunity to evaluate your child's manager and coach. This will aid us in assigning teams in the future. Every step will be taken to ensure strict confidentiality. You do not have to give your name or your child's name, but please include your child's team and manager and coach's names. Please take a few minutes to complete this form and return it to the address shown below.

Lamar Little League  
 P. O. Box 1101  
 Richmond, TX 77469

Manager's Name: \_\_\_\_\_  
 First Coach's Name: \_\_\_\_\_  
 Second Coach's Name: \_\_\_\_\_  
 Team Name: \_\_\_\_\_

Please circle the appropriate division:

T-BALL    ROOKIE    PREP    MINOR    VARSITY    MAJOR    JUNIOR    SENIOR

Please circle the number to indicate rating of:

	MANAGER POOR - EXCELLENT	FIRST COACH POOR - EXCELLENT	SECOND COACH POOR - EXCELLENT
1. Ability to work with children:	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
2. Attitude:	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
3. Communication with parents:	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
4. Knowledge of baseball:	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
5. Did your child play in at least 2 innings of <b>each</b> game?		Yes	No
6. Did all of the children sit out at least one inning of one game?		Yes	No
7. Was your child given the opportunity to play more than one position?		Yes	No
8. Did your child have fun?      Yes              No              Learn skills?		Yes	No
9. Was the manager present at all practices and games? If not, was the manager present at a sufficient number of practices and games to do an adequate job?		Yes Yes	No No
10. Was the first coach present at all practices and games? If not, was the first coach present at a sufficient number of practices and games to do an adequate job?		Yes Yes	No No
11. Was the second coach present at all practices and games? If not, was the second coach present at a sufficient number of practices and games to do an adequate job?		Yes Yes	No No
12. Would you recommend this manager to manage again?		Yes	No
13. Would you recommend this first coach to coach again?		Yes	No
14. Would you recommend this second coach to coach again?		Yes	No
15. Would you want your child to play for this Manager again?		Yes	No
First Coach?		Yes	No
Second Coach?		Yes	No

If not, please explain on back.

Please use the back of this form to list any strong and/or weak points and to provide any additional comments that you might have. **If you would like a league official to contact you, you must provide your telephone number. Your comments will be kept confidential. Without your input, we cannot properly evaluate someone for future managing or coaching.**

**OPTIONAL:**    Name: \_\_\_\_\_  
                           Address: \_\_\_\_\_  
                           Phone: \_\_\_\_\_