

**CCSD#2 ACTIVITY SPONSOR EVALUATION FORM**

**Sponsor:** \_\_\_\_\_ **Activity:** \_\_\_\_\_ **Year:** \_\_\_\_\_

**Evaluator:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please rate yourself in the coach column on each of the following items.

- 4 Area of Strength
- 3 Satisfactory Performance
- 2 Needs Improvement
- 1 Poor Performance Area
- NA Not Applicable

**Sponsor**    **Evaluator**

***Relationship with Co-Workers***

- |       |       |  |
|-------|-------|--|
| _____ | _____ | 1. Respects and supports other activities/sponsors                                 |
| _____ | _____ | 2. Communicates with staff / Administration regarding potential / current problems |
| _____ | _____ | 3. Knows and understands the role of fellow activity sponsors                      |

*Comments from Evaluator:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Sponsor**    **Evaluator**

***Performance***

- |       |       |   |
|-------|-------|---|
| _____ | _____ | 1. Has specific knowledge and training for their activity                   |
| _____ | _____ | 2. Sets appropriate example at all times with student s                     |
| _____ | _____ | 3. Organizes and prepares for meetings/events                               |
| _____ | _____ | 4. Has knowledge of WHSAA and CCSD#2 Activity policies and Guidelines       |
| _____ | _____ | 5. Maintains current knowledge of activity rule changes                     |
| _____ | _____ | 6. Works towards professional development and training                      |
| _____ | _____ | 7. Maintains appropriate dress for activity events                          |
| _____ | _____ | 8. Maintains appropriate conduct at competitions / meetings / events        |
| _____ | _____ | 9. Displays leadership skills and mentors participants and adult volunteers |
| _____ | _____ | 10. Instill an appropriate competitive spirit                               |
| _____ | _____ | 11. Instills within the activity participants a desire to improve           |

*Comments from Evaluator:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Sponsor**    **Evaluator**

**Personal and Professional Qualities**

- |       |       |  |
|-------|-------|--|
| _____ | _____ | 1. Recognizes the role of activities in the development of students' life skills |
| _____ | _____ | 2. Displays vitality and enthusiasm  |
| _____ | _____ | 3. Adapts to change when obstacles arise (in practices/games)                    |
| _____ | _____ | 4. Accepts and benefits from constructive criticism                              |
| _____ | _____ | 5. Maintains all required certifications   |
| _____ | _____ | 6. Uses language appropriately to effectively encourage a positive attitude      |
| _____ | _____ | 7. Promotes attitude of hard work, pursuit of goals, and positive attitude       |
| _____ | _____ | 8. Is prompt to all events and required meetings                                 |

Comments from Evaluator: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Relationship with Others  
(participants, parents and staff)**

**Sponsor**    **Evaluator**

- |       |       |   |
|-------|-------|---|
| _____ | _____ | 1. Exhibits a positive attitude with participants                                 |
| _____ | _____ | 2. Maintains a positive relationship with parents                                 |
| _____ | _____ | 3. Encourages and supports all student activities                                 |
| _____ | _____ | 4. Promotes and encourages participation in the activity program                  |
| _____ | _____ | 5. Demonstrates interest in classroom efforts and other school-related activities |
| _____ | _____ | 6. Works effectively and communicates with participant's teachers / advisors      |

Comments from Evaluator: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Administrative Responsibilities**

- |       |       |   |
|-------|-------|---|
| _____ | _____ | 1. Supervises meetings and events at all times from beginning until ALL participants are picked up or excused |
| _____ | _____ | 2. Assists the Principal in purchasing equipment and supplies for the activity                                |
| _____ | _____ | 3. Submitted all necessary forms to the Principal or Activities Coordinator in a timely manner                |
| _____ | _____ | 4. Attends all appropriate meetings   |
| _____ | _____ | 5. Reports information / results to appropriate press and WHSAA   |
| _____ | _____ | 6. Submits end of season reports (including individual records set) to Activities Coordinator                 |
| _____ | _____ | 7. Accepts and implements administrative decisions and policies   |

Comments from Evaluator: \_\_\_\_\_

\_\_\_\_\_

**Sponsor**    **Evaluator**

**Equipment & Facilities Maintenance**

- |       |       |  |
|-------|-------|--|
| _____ | _____ | 1. Secures facilities and equipment as applicable  |
| _____ | _____ | 2. Maintains proper use and care of equipment  |
| _____ | _____ | 3. Collects and accounts for all equipment and supplies at the end of season, completes an inventory, and properly stores them |

Comments from Evaluator: \_\_\_\_\_

\_\_\_\_\_



**For Activity Sponsor:**

List 3 things to improve upon:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

List 3 things that you feel you did well this year:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

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List 2 individual goals for next year:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_

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***Overall Comments from Principal***

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**STATUS (To be completed by Principal)**

- \_\_\_\_\_ Continue as Activity Sponsor
- \_\_\_\_\_ Probationary\*
- \_\_\_\_\_ Not recommended to continue

*\*An action plan must be developed if sponsor continues on a Probationary status by the Principal*

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*By signing this form, I acknowledge that I have seen and discussed this evaluation with the evaluator. Within 7 calendar days, I will submit additional written comments if I desire.*

\_\_\_\_\_

Activity Sponsor Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Evaluator Signature

\_\_\_\_\_

Date