

Skokie Indians Baseball and Softball 2014

Manager / League Evaluation Form – 2014 Season’s

Parent Name: _____

(optional, but strongly recommended. Information is considered strictly confidential)

Manager and Assistant Name’s: _____
(Required information)

Team Name: _____

Level*:

SPRING

- A) Rookie B) A/AA C) AAA D) Majors E) Pony
F) 1-2 Softball G) 3-4 Softball H) 5-6 Softball I) 7-8 Softball

TRAVEL

- A) 8U B) 9U C) 10U D) 11U E) 12U F) 13U G) 14U H) 8U Softball I) 10U Softball

SUMMER

- A) 8 – 10 yr. olds B) 11 – 13 yr. olds

(*Circle one of the above)

Please help us evaluate how well we did this season by telling us about your child’s manager and experience.

We are committed to Positive Coaching Alliance ideals. We expect our coaches to be “Double-Goal Coaches” who strive to win and to help players learn lessons that will help them be successful in life. A positive coach:

-Honors the Game by showing respect for the Rules, Opponents, Officials, Teammates and one’s self.

-Redefines “Winner” in terms of Mastery as well as the scoreboard by emphasizing effort, learning and improvement, and rebounding from mistakes rather than fearing them. This is the “ELM Tree of Mastery” (Effort, Learning, Mistakes OK).

-Fills “Emotional Tanks” via positive encouragement so players can play their best.

My child’s manager...

(please use a separate evaluation form for each child in your family)

(Strongly Disagree=1 Strongly Agree=5)

Honoring the Game

1) Obeyed the rules	1	2	3	4	5
2) Showed respect for officials	1	2	3	4	5
3) Treated all players with respect	1	2	3	4	5
4) Treated opponents with respect	1	2	3	4	5

(Strongly Disagree=1 Strongly Agree=5)

Redefined “Winner”

5) Rewarded effort, not just results	1	2	3	4	5
6) Helped players learn & improve	1	2	3	4	5
7) Treated all players with respect	1	2	3	4	5

Filling Emotional Tanks

8) Used positive reinforcement	1	2	3	4	5
9) Encouraged players to do their best	1	2	3	4	5
10) Made baseball fun for my child	1	2	3	4	5
11) Listened to players	1	2	3	4	5
12) Gave all players equal opportunities to succeed	1	2	3	4	5
13) Communicates effectively with parents	1	2	3	4	5
14) Would you like your child to have this manager again? Yes No					

Section II – Overall League Feedback

Please answer the following questions and provide explanations where necessary:

1. Besides your child’s manager, do you have any comments regarding the coaches (from your team or from any from opposing teams)?

2. Did the program meet your expectations?

3. Was it a positive experience for your child? If not, please explain.

4. What suggestions would you make to improve our league?

Please feel free to provide any further comments below or send us an email at pespinoza645@gmail.com

(All replies are kept strictly confidential) -

Please **mail** completed evaluation forms to:
Skokie Indians Little League
P.O. Box 823
Skokie, IL 60076

-or- **email** your forms to: prez@skokieindians.org

Additional Comments: