

PERSONAL INFORMATION SHEET COACHES

DATE SCHOOL YEAR (EG. 2008-2009)

SPORT POSITION

FIRST NAME LAST NAME

HOME ADDRESS CITY ZIP

HOME PHONE DAYTIME PHONE CELL PHONE

EMERGENCY CONTACT EMERGENCY PHONE

EMAIL ADDRESS

Playing Out of Level Form

Farwell Area Schools

Students Name: _____

Grade Level: _____

Current overall GPA: _____

Sport: _____

Head Coach: _____

Intended Sport Level: Freshmen Junior Varsity Varsity

Recommended Sport Level: Freshmen Junior Varsity Varsity

Reason for the recommended change in level: _____

Generally speaking, freshmen teams are for freshmen, junior varsity teams are for sophomores and freshmen, and varsity teams are for juniors and seniors. It has been decided that the above student has been recommended to play at a level not specifically intended for his/her grade. With the consent of the building principal, athletic director, student's parent/guardian, and student, he/she is eligible to participate at the recommended sport level.

This decision will be re-evaluated periodically throughout the sports season, by the Athletic Director and Principal, to check on the student's **maturity/behavior, physical ability, academic work, and playing time**. If any of the following areas seem to be lacking from the initial intent, the student will be re-assigned to his/her intended sports level.

Principal: _____

Date: _____

Athletic Director: _____

Date: _____

Parent/Guardian: _____

Date: _____

Student: _____

Date: _____

PARENT TRANSPORTING ATHLETES HOME

The following athletes will be riding home with their parent/guardian from (site) _____ on this date _____

As the parent/guardian of the named athlete, we assume and accept full responsibility for the transportation of our child home. We agree that by taking this action, we will not hold Farwell Area Schools, the Athletic Director, or my athlete's coach(es) liable for any accidents which may occur once my child leaves with me. I know that by school policy, I may only transport my child and will not let him/her ride with anyone else but myself, unless prior written arrangements have been made at least 24 hours in advantage and approved by either the athletic director or building principal.

ATHLETES NAME (PRINT)

PARENT/GUARDIAN SIGNATURE

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

Coaches Signature: _____

CONTEST RESULTS FORM

TEAM SPORTS RESULTS

.....
PLEASE PLACE IN ATHLETIC DIRECTORS MAILBOX WITHIN 24 HOURS FOLLOWING CONTEST
.....

COACH: _____ DATE OF CONTEST: _____

SPORT: _____ LEVEL OF SPORT: JH (7th 8th) Freshman JV Varsity
(Circle One)

CONTEST RESULTS:

FARWELL SCORE		OPPONENT'S SCORE		TEAM(S) PLAYED
(Boys)	(Girls)	(Boys)	(Girls)	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

INVITATIONAL, MEET OR TOURNAMENT PLACEMENT:

INDIVIDUAL WINNER (S)/OUTSTANDING PERFORMANCE (S):

CURRENT STANDINGS:

BOYS TEAM

GIRLS TEAM

OVERALL-----

W L T W

L T

LEAGUE-----

W L T W

L T

PROBLEMS/INCIDENTS:

OFFICIALS (S): _____

(indicate
“as assigned”
if NO change)



FARWELL AREA SCHOOLS

REQUEST FOR AWARDS

Sport:	Level:
Varsity	J.V.
Date Needed:	

Name: _____
Title of Award: _____
Name: _____
Title of Award: _____
Name: _____
Title of Award: _____

Coach: _____

Date: _____

Athletic Director Signature: _____

Date: _____

****Orders will be placed by Athletic Department****

AWARDS REQUEST SHEET

SPORT _____ COACH _____ YEAR _____

Please **ALPHABETIZE** your athletes on the form below. [.....AWARD EARNED.....]

ATHLETE NAME	Grade Level	First Varsity Letter	Frosh Number	Soph. Letter	1 ST Varsity Pin	2 ND Varsity Pin	3 RD Varsity Pin	4 TH Varsity Pin	Received Award
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									
12.									
13.									
14.									
15.									
16.									
17.									
18.									
19.									
20.									

Kerwin Paesens Male Athlete of the Year nominee: (senior) _____

Mary Pitchford Female Athlete of the Year nominee: (senior) _____

**Each varsity coach will nominate one senior male and female at end of season for this award. The award will be based on, but not limited to, *academic achievement, athletic achievement, and community involvement.*

GAME JERSEY INVENTORY

SPORT: _____ YEAR: _____ LOCATION: _____

LEVEL: JH 7th 8th Frosh JV Var. COACH: _____

HOME JERSEY (TOPS)

SHORTS

WARM-UPS (tops)

Size	Good	Fair	Replace	Size	Good	Fair	Replace	Size	Good	Fair	Replace
XS				XS				XS			
S				S				S			
M				M				M			
L				L				L			
XL				XL				XL			
XXL				XXL				XXL			
other				other				other			

HOME JERSEY NUMBERS: Place an 'X' through the numbers on the jerseys in your inventory. Indicate quantity of jersey's **IF** more than one for each number.

1	2	3	4	5	6	7	8	9	10	11	12	13	14
15	16	17	18	19	20	21	22	23	24	25	26	17	28
29	30	31	32	33	34	35	36	37	38	39	40	41	42
43	44	45	46	47	48	49	50	51	52	53	54	55	56
57	58	59	60	61	62	63	64	65	66	67	68	69	70
71	72	73	74	75	76	77	78	79	80	81	82	83	84
85	86	87	88	89	90	91	92	93	94	95	96	97	98
99	00	0											

AWAY JERSEY (TOPS)

SHORTS

WARM-UPS (bottoms)

Size	Good	Fair	Replace	Size	Good	Fair	Replace	Size	Good	Fair	Replace
XS				XS				XS			
S				S				S			
M				M				M			
L				L				L			
XL				XL				XL			
XXL				XXL				XXL			
other				other				other			

AWAY JERSEY NUMBERS: Place an 'X' through the numbers on the jerseys in your inventory. Indicate quantity of jersey's **IF** more than one for each number.

1	2	3	4	5	6	7	8	9	10	11	12	13	14
15	16	17	18	19	20	21	22	23	24	25	26	17	28
29	30	31	32	33	34	35	36	37	38	39	40	41	42
43	44	45	46	47	48	49	50	51	52	53	54	55	56
57	58	59	60	61	62	63	64	65	66	67	68	69	70
71	72	73	74	75	76	77	78	79	80	81	82	83	84
85	86	87	88	89	90	91	92	93	94	95	96	97	98
99	00	0											

SEASON SUMMARY

Sport _____ Coach _____ Date _____

<u>Opponents</u>	<u>Score</u>	<u>Outstanding Performances and Accomplishments</u> (ex. All league, conf., state)
1. _____	_____ W/L/T	
2. _____	_____ W/L/T	1. _____
3. _____	_____ W/L/T	_____
4. _____	_____ W/L/T	_____
5. _____	_____ W/L/T	2. _____
6. _____	_____ W/L/T	_____
7. _____	_____ W/L/T	_____
8. _____	_____ W/L/T	3. _____
9. _____	_____ W/L/T	_____
10. _____	_____ W/L/T	_____
11. _____	_____ W/L/T	4. _____
12. _____	_____ W/L/T	_____
13. _____	_____ W/L/T	_____
14. _____	_____ W/L/T	5. _____
15. _____	_____ W/L/T	_____
16. _____	_____ W/L/T	_____
17. _____	_____ W/L/T	Season Record
18. _____	_____ W/L/T	W _____ - L _____ - T _____
19. _____	_____ W/L/T	Jack Pine Conf. Record & Standing
20. _____	_____ W/L/T	JPC Place _____ JCP record W _____ - L _____ - T _____

LOST EQUIPMENT FORM

DATE: _____ SPORT: _____

STUDENT/ATHLETES: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Dear Parent/Guardian,

Your son/daughter was charged with the care, custody and control of certain athletic items. The following item(s) have not been turned in and must be replaced at the purchase price paid for by the Farwell Area School District.

It is unfortunate that this has occurred, but a check or money order in the amount of \$ _____ will be required at this time to replace the item(s) and before any further school issued equipment is given.

Please make the check or money order payable to: Farwell Area Schools, Athletic Director, 399 E. Michigan St., Farwell, Michigan 48622.

ITEMS

COST

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL _____

Student/Athletes Signature: _____

Athletic Director: _____

Coach: _____

FARWELL AREA SCHOOLS HEAD COACH EVALUATION

Coaches Name _____ Assignment _____

Years Experience in Assignment _____ Date _____ Evaluator _____

1 = Exceeds Expectations 2 = Meets Expectations 3 = Did not Meet Expectations 4 = Not Applicable

I. Professional & Personal Characteristics

- ____ 1. Develops positive rapport with team personnel, the student body, school staff, parents, and fellow coaches.
- ____ 2. Exhibits enthusiasm and interest in and toward athletes and program.
- ____ 3. Displays respect for athletes, coaches, parents, and officials.
- ____ 4. Cooperates with the athletic director and other school staff.
- ____ 5. Cooperates with fellow coaches in sharing facilities and equipment.
- ____ 6. Dresses appropriately for games, practices, and athletic sponsored programs.
- ____ 7. Develops sound public relations, i.e. media, parents' night, banquet, etc.
- ____ 8. Acts as role model, displays leadership and develops respect for athletes, coaches, parents, and community.
- ____ 9. Participates in activities to improve coaching performance, i.e. clinics, camps.
- ____ 10. Participates in parents' night, banquets, awards nights, and school assemblies.
- ____ 11. Attends JPC and MSHAA meetings including yearly rules meetings.
- ____ 12. Fosters school spirit by promoting other sports and co-curricular activities.

II. Coaching Performance

- ____ 1. maintains composure and suitable conduct during practices and contests.
- ____ 2. Well versed and knowledgeable about the sport.
- ____ 3. Submits information by deadlines, i.e. rosters, physicals, pre/post season paperwork, officials ratings forms, etc.
- ____ 4. Follows FHS and MSHAA policies and handbook regulations.
- ____ 5. Provides training rules to athletes and parents. Submit rules to the AD prior to each season.
- ____ 6. Has individual and team discipline and control.
- ____ 7. Is fair, consistent, and understanding, with athletes.
- ____ 8. Follows due process procedures when having to discipline athletes.
- ____ 9. Uses sound and acceptable teaching/coaching practices.
- ____ 10. Conducts well organized practices and utilizes practice time for individual and team development.
- ____ 11. Develops and distributes well organized practice schedules to athletes and parents.
- ____ 12. Competent in medical aspect of the position, adhering to a well-defined program of safety and injury prevention.
- ____ 13. Construct a well-organized game plan.
- ____ 14. Establishes a fundamental philosophy, skills, and techniques to be taught by the coaching staff.
- ____ 15. Develops a sound system of equipment accountability, including inventory, repair, and replacement with AD.
- ____ 16. Displays enthusiasm and exhibits interest in coaching.
- ____ 17. Team performance is consistent with skills of the athletes.

III. Related Coaching Responsibilities

- ____ 1. Communicates and provides information to the news media.
- ____ 2. Advises the AD of communications and projects in advance.
- ____ 3. Selects and trains student managers; provides clear expectations.
- ____ 4. Assists the AD with the scheduling of practices, contests, scrimmages, and transportation when needed.
- ____ 5. Follows proper procedure for purchasing equipment and supplies.
- ____ 6. Encourages potential athletes to participate in sports.
- ____ 7. Shows interest in athletes' class work and off-season activities.
- ____ 8. Attends athletic departmental meetings.
- ____ 9. Works with sub-varsity coaches in developing a coordinated program.
- ____ 10. Administers and supervises locker rooms, weight room, and buses.
- ____ 11. Is receptive to suggestions made by other coaches, staff, and administration.
- ____ 12. Operates the sport within the budget as determined by the AD.
- ____ 13. Fulfills obligations and cooperates with Sports Boosters.
- ____ 14. Communicates the risks of athletic participation to the athletes.

End of Season Checklist:

- _____ 1. Sports Equipment Inventory List
- _____ 2. Uniform Inventory List
- _____ 3. Jersey Inventory List
- _____ 4. Uniform Student Sign-out List
- _____ 5. Program Needs List
- _____ 6. Season Summary Sheet
- _____ 7. Sub-varsity and assistant evaluations
- _____ 7. Awards Request (turned in 1 wk. Prior to Banquet)
- _____ 8. Transportation Sign-out Lists (1 for each away contest)
- _____ 9. Lost Equipment Forms (for each student-athlete with non-returned equipment)
- _____ 10. MHSAA officials' ratings completed and sent in.

Comments:

Summary:

- _____ A. Effective, recommended for continued assignment.
- _____ B. Needs Improvement; recommended for assignment, provided a solution can be reached in the area(s) that did not meet expectations, and a pre-season meeting with the AD will be schedules to review those areas.
- _____ C. Unsatisfactory; not recommended for continued assignment.

I have received and understand the evaluation in which I have been given for my head coaching duties at Farwell Area Schools.

Coaches Signature: _____ Date: _____

Evaluator's Signature: _____ Date: _____

Coaching Interest Form

(For Next Coaching Season)

Date: _____

Name of Coach: _____

Current Position: _____

Coaching season just completed: (year) _____

I intend to return to coach at Farwell Area Schools next year in the same coaching position.
(Please circle) YES NO UNDECIDED

I intend to apply for a different coaching position next year. YES NO

If you answered yes to the above question, then which position would you be interested in?

I understand that answering the above information is not a coaching contract. The above information is merely to aid the Athletic Director in determining my intent for coaching next season so that he/she may prepare accordingly.

Coaches Signature: _____

Date of Signature: _____