

GWFSA

2023-2024 Coach of the Year Nomination Form

*Must have coached both Fall and Spring seasons

Circle Role: Player, Parent/Guardian, Coach, Referee

Name: _____

I would like to nominate coach _____ from the U ___ age group for boys/girls team named _____.

Please rate the coach on the following (1 being the lowest and 10 the highest):

- | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|---|---|---|----|
| 1) Development of Players | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 2) Treatment of Players | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 3) Knowledge of the Game | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 4) Sportsmanship | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 5) Interactions with Parents | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 6) Interactions with Referee | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

Use the space below to expand on any of the 6 categories above to help us know why this coach deserves to be coach of the year.