COLDWATER ATHLETIC DEPARTMENT

END OF SEASON REPORT

Assistant Coach

Payment is hereby authorized for:

Name of Employee _____________________ Date: ___________

Assignment:___________________________________________

Approved by:______________________________ Date: ___________

Athletic Director
End of the Season Report
Instructions

Assistant Coach:
1. Complete the End of Season Checklist
2. Complete the “Self” column of the Self-Evaluation form.
3. Complete the Season Summary form
4. Complete the Equipment and Supplies Inventory form
5. Complete the Uniform Inventory form
6. Complete the Needs/Wants form
7. Schedule a conference with the Head Coach after completing All forms

Within 2 weeks of the conclusion of your season – Return this packet.

Note: We do NOT help with any banquet expenses (food, decorations, etc.)

Be sure to collect ALL Unforms and Equipment NOW! Do not fill in the form that you have inventoried it if you haven’t yet.

Thanks

Eric Goodwin
Athletic Department
Coldwater High School

End of Season Checklist

Coach: _________________________________ Sport/Level: _________________________________

Date: _________________________________

Head Coach Checkoff

_____ Season Summary/Scores of all games

_____ Equipment Inventory

_____ Uniform Inventory (Must have ALL uniforms returned)

_____ Needs/Wants for next year form

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Athletic Department
Coldwater High School

Season Summary

Sport/Level _________________________________ Date _________________________________

Coach _________________________________

Record _________________________________ Conference Record _________________________________

Team Recognition _________________________________ _________________________________

_______________________________ _________________________________

_______________________________ _________________________________

_______________________________ _________________________________

*Provide Season Scores and Opponents for All games at checkout*
Athletic Department  
Coldwater High School  

Equipment & Supplies Inventory  

Sport ___________________________ Date _____________________  
Coach ___________________________  

<table>
<thead>
<tr>
<th>Item</th>
<th># of items</th>
<th>Condition (New, Good, Fair, Poor)</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
## Uniform Inventory

**Sport** ____________________________  **Date** ____________________________

**Coach** ____________________________

1) * Supply to me a copy of your individual athlete inventory sheet. Show the issued items and show the checked off returned items. – Include Junior High Also i.e. *

<table>
<thead>
<tr>
<th>Name</th>
<th>Item</th>
<th>Size</th>
<th>Color</th>
<th>Item #</th>
<th>Date Issued</th>
<th>Date Return</th>
<th>Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>John Doe</td>
<td>Pants</td>
<td>Medium</td>
<td>Black</td>
<td>N/A</td>
<td>8/1/2017</td>
<td>10/1/2017</td>
<td>None</td>
</tr>
<tr>
<td>John Doe</td>
<td>Jersey</td>
<td>Medium</td>
<td>Black</td>
<td>33</td>
<td>8/1/2017</td>
<td>10/1/2017</td>
<td>None</td>
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</tbody>
</table>

2) Team Uniforms (Bulk Inventory) – Include Junior High Also

<table>
<thead>
<tr>
<th>Uniform Item</th>
<th>How many</th>
<th>Color</th>
<th>Condition</th>
<th>When Last purchased</th>
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</thead>
<tbody>
<tr>
<td>Varsity Shorts</td>
<td>24</td>
<td>Black</td>
<td>Good</td>
<td>2015</td>
</tr>
<tr>
<td>Junior High Reversibles</td>
<td>24</td>
<td>Orange</td>
<td>New</td>
<td>2017</td>
</tr>
</tbody>
</table>
Athletic Department  
Coldwater High School  

Needs/Wants

Sport ___________________________  Date ____________________

Coach ___________________________

<table>
<thead>
<tr>
<th>Item</th>
<th>Number Needed</th>
<th>Reason</th>
<th>Approx Cost</th>
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SELF-EVALUATION

NAME: ____________________________________________

ASSIGNMENT: ______________________________________

DATE: ____________________________________________

PART 1: TO THE COACH  Using the scale below, please rate the performance of coaching duties using the proper column.

1 - Excellent  2 - Effective  3 - Average  4 - Needs Improvement  5 - Unacceptable

1. Loyalty to head coach and system.  
2. Care of equipment.  
3. Knowledge of the sport and fundamental skill techniques.  
4. Fundamental teaching and coaching ability.  
5. Ability to motivate athletes.  
6. Rapport with players, parents, and community.  
7. Meets all requirements according to ODE, OHSAA, Coldwater Schools  
8. Supervision of players in locker room and other areas under coach’s jurisdiction.  
9. Relationship between coach and rest of coaching staff.  
10. Seeks and follows directives of head coach.  
11. Fulfills coaching assignments and adheres to practice schedules.  
12. In-season and out-of-season involvement in program.  
13. Respect, control, and discipline of athletes under your supervision.  
14. Appearance, behavior and language utilized during games and practice sessions.  
15. Has a positive coaching attitude and uses sound judgments when making decisions.

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SELF - H.C.  

PART 2: TO THE COACH  Please check one of the following areas:

_____ If offered, I would like to continue in this position for the next school year.

_____ I do not wish to take this position for the next school year.

PART 3: TO THE HEAD COACH  Please check one of the following areas:

_____ Recommend contract renewal

_____ Recommend conditional re-employment reassignment with the program

_____ Resignation accepted

_____ Recommended for non-renewal

PART 4: SIGNATURE  Indicates that the signed person has completed evaluation.

Coach’s Signature: ___________________________ Date: ____________

Head Coach’s Signature: ________________________ Date: ____________

Athletic Director’s Signature: ___________________ Date: ____________