

APPENDIX E

**STATE SYSTEM OF HIGHER EDUCATION COACHES
PERFORMANCE REVIEW AND EVALUATION DOCUMENT**

COACH'S Name: _____ Type of Report: Annual
_____ Interim
University: _____
_____ Interim
Evaluation Period: _____

CATEGORIES OF PERFORMANCE REVIEW AND EVALUATION

1. Fulfillment of Professional Responsibilities shall include criteria such as:
- *performance of job duties and responsibilities
 - *team progress and development Significantly Exceeds Expectations
 - *quality of sports strategies Above Expectations
 - *efforts to promote the academic success of the student athletes At Expectations
 - *compliance with rules and regulations of the NCAA and other athletic conferences of that the University is a member Below Expectations
 - *compliance with existing PSAC rules and regulations Unsatisfactory
 - *character development of student athletes

Comments:

2. Professional Growth and Development shall include criteria such as:
- *participation in NCAA, PSAC or other appropriate conferences of that the University is a member Significantly Exceeds Expectations
 - *offices held in athletic conference administration or other professional organizations Above Expectations
 - *participation in panels at conferences or professional meetings At Expectations
 - *publications Below Expectations
 - *contributions to professional growth of one's peers Unsatisfactory

Comments:

3. Service shall include criteria such as:

*participation in University committees at all levels

*activity contributing to the governance Expectations Significantly Exceeds

of the University (that may include APSCUF activity) Above Expectations

*participation in University-wide colloquia At Expectations

*membership in professionally oriented and community-based organizations Below Expectations

*speaking to and consulting with community organizations Unsatisfactory

*promotion of alumni relations

Comments:

4. Overall Rating and Comments: (Continue on additional paper)

Significantly Exceeds Expectations

Above Expectations

At Expectations

Below Expectations

Unsatisfactory

Comments:

Areas of Strong Competence:

Areas in Need of Improvement:

Other Comments:

Athletic Director's final evaluation:

Athletic Director's Signature

Date

COACH being evaluated (check appropriate boxes):

I acknowledge that I have read this report and that I have been given an opportunity to discuss it with my evaluator. My signature does not necessarily mean that I agree with the report.

I have comments that are attached. Yes ___ No ___

I would like to discuss this report with the reviewing officer. Yes ___ No ___

COACH'S Signature

Date

Review by Reviewing Officer (check appropriate boxes):

___ As requested, reviewing officer discussed report with coach.

___ The coach did not request a meeting with the reviewing officer.

The reviewing officer has comments that are attached. Yes ___ No ___

___ The reviewing officer has prepared an adjusted evaluation which is attached. The original evaluation is destroyed. The coach has comments to the adjusted evaluation that are attached. Yes ___ No ___

Reviewing Officer Signature

Date

Return original to Office of Human Resources for placement in the COACH'S personnel file and a copy to the reviewing officer and the coach.