Note: S - Sanisfactory SI - Needs Improvement U - Unsatisfactory NA - Not Applicable  PERFORMANCE EVALUATION S SI U NA  1. Instruction  a Has knowledge of the sport (	number of Years of Service as: Head Coach	1 specie 1		nt Coaci		<del></del>
Instruction   a   Has knowledge of the sport   (	ote: S - Sanisfactory SI - Needs Improvement U	- Unsatistactor	/ NA-I	Act Ybbi	cable	·
a Has knowledge of the sport b. Has ability to teach knowledge C. Enthusiasm d. Has self-control and poise e. Control/Discipline of athletes  Organization a Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports  Personal Relationships a Rapport with athletes b. Rapport with his/her staff c. Rapport with bis/her staff c. Rapport with officials e. Rapport with Sports Boosters d. Rapport with Sports Boosters g. Rapport with hadministration h. Rapport with media i. Role model to athletes  Administration a Follows rules and policies b. Concern for health and safety of students d. Follows proper channels  (Additional comments on the back)  Cour services were rated as: Satisfactory (N. Needs Improvement () Unsatisfactory ()  Signature of Coach  Date  Mancay (Andal Andal Date	ERFORMANCE EVALUATION	S	SI	U	ÑA	
a. Has knowledge of the sport b. Has ability to teach knowledge C. Enthusiasm d. Has self-control and poise e. Control/Discipline of athletes Corganization a. Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports  C. Personal Relationships a. Rapport with athletes b. Rapport with this her staff c. Rapport with officials e. Rapport with officials e. Rapport with Sports Boosters d. Rapport with Maministration h. Rapport with media i. Role model to athletes  C. Supervises students d. Follows proper channels  (Additional comments on the back)  Wour services were rated as: Satisfactory  (Noeds Improvement  () Unsatisfactory  () Meeds Improvement  () Unsatisfactory  () Contains Date  (	Instruction		•			
a Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports  8. Personal Relationships a Rapport with athletes b. Rapport with other staff c. Rapport with other staff d. C. Rapport with other staff d. C. Rapport with other staff d. C. Rapport with officials e. Rapport with parents of athletes d. Rapport with parents of athletes d. Rapport with Administration f. Rapport with Administration d. Rapport with media d. Rapport with media d. Role model to athletes  d. Administration a Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  Additional Comments:  (Additional comments on the back)  Wour services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach  Date  Signature of Evaluator Administration Date	a. Has knowledge of the sport b. Has ability to teach knowledge c. Enthusiasm d. Has self-control and poise	(X) (X)	()	()	() () ()	
a Rapport with athletes b. Rapport with his/her staff c. Rapport with officials d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes  4. Administration a Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory  (Additional Comment  Signature of Coacia  Date  Signature of Evaluator  (Additional Comment  Date  Signature of Evaluator	<ul><li>a. Well planned practices</li><li>b. Care and inventory of equipment</li><li>c. Demonstrates punctuality</li></ul>	(X)	()	()	()	
a. Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  (Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory (No Needs Improvement () Unsatisfactory ()  Signature of Coaci  Signature of Evaluator  (Additional Comments on the back)  Date  Signature of Evaluator	a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media	888888	() () () () ()	()	() () () () ()	
(Additional comments on the back)  Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach	<ul> <li>a. Follows rules and policies</li> <li>b. Concern for health and safety of students</li> <li>c. Supervises students</li> </ul>	(x) (x)	()		()	
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Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coacia	(Additional com	nents on the bas	<u>:</u> k)	·		<del></del>
Signature of Evaluator Mancy and and Date 5/14/06		-		() U	nsatisfacto	ıà ()
Signature of Evaluator // Ancy Ondiaoth Date 3/19/06	ignature of Coach		Date _		<i>F.</i> ,	
	ignature of Evaluator <u>Anou</u> On C	LAOCK	_Date _	رګ	119/	06_

## WARREN COUNTY SCHOOL DISTRICT CEIVED MAR 2 1 2000

School_ Beaty Middle School s	Sport <u>Soy</u>	<u>s ba</u>	sket	bai!
Name Jeanna Moprison 5	Season	05-0	b	_ <del>,</del>
Number of Years of Service as: Head Coach				
PERFORMANCE EVALUATION	S	SI	U	NA
Instruction     a. Has knowledge of the sport     b. Has ability to teach knowledge     c. Enthusiasm     d. Has self-control and poise     e. Control/Discipline of athletes	888 888 888	() () () ()	()	~() () () ()
<ul> <li>2. Organization</li> <li>a. Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>	(A)	() () ()	()	()
3. Personal Relationships a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes	88888888	() () () () () ()	() () () () () ()	() () () () () () ()
<ul> <li>4. Administration</li> <li>a. Follows rules and policies</li> <li>b. Concern for health and safety of students</li> <li>c. Supervises students</li> <li>d. Follows proper channels</li> </ul>	(S) (S) (S)	()	() () ()	() () ()
Additional Comments:		-		
Your services were rated as:   Satisfactory   Signature of Coach   Mana   Mana   Signature of Evaluator   Principal's Signature   Yes   Signature   Mana   Yes   Signature   Mana   Mana   Yes   Signature   Mana   Mana	Needs Improved Many	vement (  Date	3/3//	satisfactory () 10/06 14/06

Note: S - Satisfactory SI - Needs Improvement U - Unsatisfactory NA - Not Applicable  PERFORMANCE EVALUATION S SI U NA  1. Instruction  a Has knowledge of the sport (\( \) (\) (\) (\) (\) (\) b. Has ability to teach knowledge (\( \) (\) (\) (\) (\) (\) c. Enthusiasm (\) (\) (\) (\) (\) (\) (\) d. Has self-control and poise (\) (\) (\) (\) (\) (\) (\) (\) (\) (\)			Beaty Middle School  Ed Nowicki  of Years of Service as: Head Coach					
Instruction   a Has knowledge of the sport   (**)				•			$(\gamma^{+})^{+}$ $\delta r$ cable	iade)
Has knowledge of the sport	EF	UFO]	RMANCE EVALUATION	s	SI	Ū	NA	
b. Has ability to teach knowledge c. Enthusiasm d. Has self-control and poise e. Control/Discipline of athletes  2. Organization a. Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports  3. Personal Relationships a. Rapport with athletes b. Rapport with this/her staff c. Rapport with other sport coaches d. Rapport with this/her staff c. Rapport with fificials d. Rapport with parents of athletes f. Rapport with parents of athletes f. Rapport with Administration d. Rapport with media i. Role model to athletes  4. Administration a. Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  Your services were rated as:  Satisfactory  Needs Improvement  Unsatisfactory  Unsatisfactory  Unsatisfactory  One Manual Comments  Calculated Administration  Additional Comments:  Principal's Signature	1.	Inst	ruction					
C								
Has self-control and poise   Control/Discipline of athletes   Co								
e Control/Discipline of athletes  2. Organization a Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports  3. Personal Relationships a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with parents of athletes g. Rapport with parents of athletes d. Rapport with ministration f. Rapport with ministration h. Rapport with media i. Role model to athletes  4. Administration a Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory (x) Needs Improvement () Unsatisfactory ()  Signature of Evaluator    Annual Conductor   Date				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
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c. Demonstrates punctuality d. Record keeping and reports  3. Personal Relationships a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with other sport coaches d. Rapport with parents of athletes e. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with Administration i. Role model to athletes d. Concern for health and safety of students c. Supervises students d. Follows proper channels  Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory (M) Needs Improvement (Date Exincipal's Signature  Date  Signature of Evaluator  Principal's Signature  Date  Signature of Evaluator  Principal's Signature								
d. Record keeping and reports  3. Personal Relationships  a Rapport with athletes b. Rapport with other sport coaches c. Rapport with officials c. Rapport with officials d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes  4. Administration a Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  (Additional comments on the back)  Your services were rated as: Satisfactory  (Moditional comments on the back)  Signature of Coach  Date  Signature of Evaluator  Principal's Signature								
a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes  4. Administration a Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach  Date  Principal's Signature  Order of Signature  Principal's Signature  Date  Principal's Signature								
b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes  4. Administration a. Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  (Additional Comments:  (Additional Comments:  (Additional Comments (1) Unsatisfactory (2)  Signature of Coach  Date  Principal's Signature	3.			4.0		()		
c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes () () () () f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes () () () () f. Administration a. Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  (Additional Comments:  (Additional Comments:  (Additional Comments on the back)  Your services were rated as: Satisfactory () Needs Improvement () Unsatisfactory ()  Signature of Coach  Date  Principal's Signature				(X)				
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g. Rapport with Administration h. Rapport with media i. Role model to athletes  () () () () h. Rapport with media i. Role model to athletes  () () () () h. Rapport with media i. Role model to athletes  () () () () h. Administration a. Follows rules and policies b. Concern for health and safety of students () () () () c. Supervises students d. Follows proper channels  (Additional Comments:  (Additional Comments on the back)  (Additional Comments:  (Additional Comments on the back)  Signature of Coach  Date  Principal's Signature		e.	Rapport with parents of athletes	(X)				
h. Rapport with media i. Role model to athletes  (X) () () () i. Role model to athletes  (X) () () () (X) () (X) () () (X)								
i. Role model to athletes  (X) () ()  Administration  a. Follows rules and policies () (X) () ()  b. Concern for health and safety of students (X) () ()  c. Supervises students (X) () () ()  d. Follows proper channels (X) () () ()  Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach Date  Principal's Signature								
a Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  (Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach  Date  Principal's Signature								
b. Concern for health and safety of students c. Supervises students d. Follows proper channels  (Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach  Date  Principal's Signature	ļ.			4.			<i>(</i> )	
c. Supervises students d. Follows proper channels  (Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach  Date  Principal's Signature		_						
d. Follows proper channels  (Additional Comments:  (Additional comments on the back)  Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach  Date  Signature of Evaluator  Principal's Signature								
(Additional comments on the back)  Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach								
Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach	Ado	litiot	nal Comments:					<u></u>
Your services were rated as: Satisfactory (X) Needs Improvement () Unsatisfactory ()  Signature of Coach	~				d-7			·
Signature of Coach Date			·					
Signature of Evaluator Many Ondrank Date 3/14/06  Principal's Signature	You	nr se	rvices were rated as: Satisfactory (X)	Needs Improv	ement	() U	nsatisfactory	()
Principal's Signature	Sig	natw	A (1)				ĭ //	. /
	Sig	natu		DANK.	_Date _	9	114/6	6
	F	SAT						
	Sia	matin			Date	-2	17/08	2

School Beaty-Worren M.S. Sport	Chee	rlead	ing :	Winter
School Beaty-Worren M.S. Sport  Name Nicole Bonnell Season	200	5/200	6	
Number of Years of Service as: Head Coach	·····	Assista	nt Coach	1
Note: S - Satisfactory SI - Needs Improvement U - Uns	atisfactory	NA - 1	Not Appl	icable
PERFORMANCE EVALUATION	S	SI	U	ÑA
Instruction     A Has knowledge of the sport     Has ability to teach knowledge     Enthusiasm     Has self-control and poise     Control/Discipline of athletes	88888	() () () ()	() () () ()	-() () () ()
<ul> <li>2. Organization</li> <li>a. Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>	8	() () ()	() () ()	() () () ()
3. Personal Relationships a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes		()	() () () () () ()	000000000000000000000000000000000000000
4. Administration  a. Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  Additional Comments: Outstanding job		()	() () () ()	() () ()
	······································	·F/	***************************************	
Your services were rated as: Satisfactory (V. New			() U	nsatisfactory (
Signature of Coach Num S. Bon	N.V	_ _Date _	2.	7-06
Signature of Evaluator Manay and Asia	! 	_Date _	<u> </u>	-23-06
Principal's Signature IF SATISFACTORY:				
<u> </u>	No			rammag and at
Signature / Jones		Date		7-06

Scho	ool	Bea	ty-Warren	M.S.	_Sport	Wre	stling			
Nan	ъе	Herb	ty-Warren Anderson		_ Season _	200	05-20	56		
			of Service as:							
Not	e: S	- Satisfac	tory SI - Needs	Improvement	U - Unsati	sfactory	NA - N	ot Appli	cable	<del></del>
PE	RFOI	RMANC	E EVALUATIO	ON		S	SI	Ū	NA	
1.	Inst	ruction					()	()	()	
			vledge of the spo				$\mathcal{C}$	()	~() ()	
			ty to teach know	eage		6	()	()		
		Enthusia:		•		8	$\ddot{\omega}$	$\ddot{\alpha}$		
			control and poise Discipline of ath			(3)	()	()	()	
2.	<u>Org</u>	anization	1			/		()		
			nned practices	_			$\left( \cdot \right)$	$\mathcal{C}$	()	
			inventory of eq			8	$\sim$	$\sim$	$\ddot{0}$	
			trates punctuality seeping and repo			(3)	()	()	$\ddot{o}$	
3.	Per	sonal Re	lationships			/	,		()	
			with athletes	_			$\Theta$	$\Omega$	()	
			with his/her staf			68	$\mathbf{B}$	$\sim$	()	
			with other sport	coacnes		(X)	()	()		
			with officials with parents of a	athletes		(X)	()	()	()	
			with Sports Boo			(8)	()	()	()	
	<b>Z</b> .	Rapport	with Administra	ition		(8)	()	()	()	
	h.	Rapport	with media	•		(N)	()	$\Omega$	()	
	i.	Role mo	del to athletes			(1)	()	()	()	
4.		ninistrat				1.8	Ó	()	()	٠
	a.	Follows	rules and policie	S form of studen	to	- 8/	$\ddot{0}$			
			for health and s	arety of smoon	LS .	W.	$\ddot{o}$			
			ses students proper channels	i	•	(X	()	$\dot{}$	()	
<b>A</b> 4		nal Comr	~ · · · · · · · · · · · · · · · · · · ·	reat sea	ron I			<u>-</u>		
PŝU	шио		ncuts///		*					
٠.				(Additional	comments o	on the bac	<b>'</b> k)			
Yo	ur se	rvices we	ere rated as:	Satisfactory	(L) Need	is Improv	ement	() U	nsatisfactor	y ()
Såg	znatu	re of Coa	ch ###	24 llanger		4.7				
Sią	gnatu	re of Eva	luator <u>I AN</u> Princi	oy Uni	rasi	<u>h_</u>	_Date _	2 -	23-06	•
IF	SAT	ISFACI	ORY:	r-7						
Ιv	vill be	e availabl	le to serve next y	ear.	Yes (4)	No	()			
Sie	mabi	re Me	HHA.	la	-		Date	2-13	5-06	

School	Beaty-Wornen Mis.	Sport _	Wrest	ling			
Name .	Beaty-Wornen M.S. Dean Johnson	_ Season _	200	5-20	06	<i>-</i> 7	<u></u>
Numbe	er of Years of Service as: Head Coach	<u></u>		Assistar	it Coach	<u> </u>	
Note:	S - Satisfactory SI - Needs Improvement	U - Unsat	isfactory	NA - N	ot Appli	cable	
PERF	ORMANCE EVALUATION		S	SI	U	NA	
a b c d	Has knowledge of the sport Has ability to teach knowledge Enthusiasm Has self-control and poise Control/Discipline of athletes		5555	() () () ()	() () () ()	-() () () ()	t
a b. c.	rganization  Well planned practices  Care and inventory of equipment  Demonstrates punctuality  Record keeping and reports		(1)	() () ()	()	() () () ()	
a b c d e f g	Rapport with his/her staff Rapport with other sport coaches Rapport with officials Rapport with parents of athletes Rapport with Sports Boosters Rapport with Administration Rapport with media		23333353	()		000000000000000000000000000000000000000	
a. b. c. d.	dministration  Follows rules and policies  Concern for health and safety of student Supervises students  Follows proper channels  ional Comments:  Meat sla	<b>)</b>	(A) (A)	()	() () ()	() () ()	···········
	(Additional o	omments	on the bac	<b>'</b> k)			
Signa	ture of Coach Lean a. Johnsen	•		_Date_	2-1	Insatisfactor 15-06 23-06	у (
DF SA	Principal's Signature ATISFACTORY:						
	be available to serve next year.	Yes (V)	No	() Date	· 2-	15-06	

Note: S - Satisfactory SI - Needs Improvement U - Unsatisfactory NA - Not Applicable  PERFORMANCE EVALUATION S SI U NA  1. Instruction a. Has knowledge of the sport b. Has ability to teach knowledge c. Enthusiasm d. Has self-control and poise c. Control/Discipline of athletes f. Other  2. Organization a. Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports e. Other  3. Personal Relationships a. Rapport with tabletes b. Rapport with other sport coaches d. Rapport with other sport coaches d. Rapport with fibrates f. Rapport with Administration h. Rapport with Administration h. Rapport with Administration h. Rapport with Administration a. Follows rules and policies b. Concern for health and safety of students d. Follows proper channels c. Additional comments  (Additional comments:  (Additional comments  (Additional comments	School OSOVHOWOR Sport	B	BASIC	ETBAU		:
1. Instruction a. Has knowledge of the sport b. Has ability to teach knowledge c. Enthusiasm d. Has self-control and poise e. Control/Discipline of athletes f. Other  2. Organization a. Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports e. Other  3. Personal Relationships a. Rapport with other sport coaches b. Rapport with other sport coaches d. Rapport with officials e. Rapport with Administration h. Rapport with media i. Role model to athletes j. Other  4. Administration a. Follows rules and policies b. Concern for health and safety of students d. Follows proper channels e. Other  (Additional comments.  (Additional comments on the back)  Needs Improvement	School <u>CBONHOWOK</u> Sport  Name <u>KEN CROSBY</u> Seaso	on	05-0	6	8	cease a prigation
1. Instruction a. Has knowledge of the sport b. Has ability to teach knowledge c. Enthusiasm d. Has self-control and poise e. Control/Discipline of athletes f. Other  2. Organization a. Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports e. Other  3. Personal Relationships a. Rapport with diherer staff C. Rapport with other sport coaches d. Rapport with other sport coaches f. Rapport with fisicials e. Rapport with Sports Boosters f. Rapport with Sports Boosters f. Rapport with media i. Role model to athletes j. Other  4. Administration a. Follows rules and policies b. Concern for health and safety of students d. Follows proper channels e. Other  (Additional comments:  (Additional comments.on the back)  Your services were rated as:  (Additional comments.on the back)  Needs Improvement	Note: S - Satisfactory SI - Needs Improvement	. U - Unsa	tisfactory	NA - Not Appl	icable	e e e e e e e e e e e e e e e e e e e
a. Has knowledge of the sport b. Has ability to teach knowledge c. Enthusiasm d. Has self-control and poise e. Control/Discipline of athletes f. Other  2. Organization a. Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports e. Other  3. Personal Relationships a. Rapport with athletes b. Rapport with officials c. Rapport with officials e. Rapport with officials e. Rapport with parents of athletes f. Rapport with Administration h. Rapport with media i. Role model to athletes b. Concern for health and safety of students c. Supervises students d. Follows proper channels e. Other  (Additional comments on the back)  Your services were rated as:  (Additional comments on the back)  Needs Improvement	PERFORMANCE EVALUATION	S	SI U	NA		j. D
a. Well planned practices b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports e. Other  3. Personal Relationships a. Rapport with athletes b. Rapport with athletes c. Rapport with other sport coaches d. Rapport with officials e. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes j. Other  4. Administration a. Follows rules and policies b. Concern for health and safety of students d. Follows proper channels e. Other  (Additional comments on the back)  Your services were rated as: Satisfactory  (Needs Improvement	<ul> <li>a. Has knowledge of the sport</li> <li>b. Has ability to teach knowledge</li> <li>c. Enthusiasm</li> <li>d. Has self-control and poise</li> <li>e. Control/Discipline of athletes</li> </ul>	444		) ( ) ) ( ) ) ( ) ) ( ) ) ( )		The second secon
a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Sports Boosters h. Rapport with Administration h. Rapport with media i. Role model to athletes j. Other  4. Administration a. Follows rules and policies b. Concern for health and safety of students d. Follows proper channels e. Other  (Additional comments on the back)  Your services were rated as:  (Additional comments (Additional comments)	<ul><li>a. Well planned practices</li><li>b. Care and inventory of equipment</li><li>c. Demonstrates punctuality</li><li>d. Record keeping and reports</li></ul>	(x)	() (	) ( ) ) ( ) ) ( ) ) ( )		
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Your services were rated as:  (Additional comments on the back)  Your services were rated as:  ( )	<ul> <li>a. Follows rules and policies</li> <li>b. Concern for health and safety of studen</li> <li>c. Supervises students</li> <li>d. Follows proper channels</li> <li>e. Other</li> </ul>	ts (V)	() (	) ( ) ) ( ) ) ( ) ) ( )		
Your services were rated as:  ( ) Needs Improvement  ( ) Unsatisfactory ( )	Additional Comments:			**************************************		
Signature of Evaluator New Date 2 Har Selly M. Mar.  (Principal or Designee)  IF SATISFACTORY:  I will be available to serve next year. Yes W No ()  Signature Date 2 2006	Your services were rated as:  ( )  Signature of Coach  Signature of Evaluator  (Principal or Desi  IF SATISFACTORY:  I will be available to serve next year.  Yes	gnee)	()Date		Elly M. (	Marti 106

Scho	ool	_EISON HOWE	re	Sport _	$\_B$	. BAS	K870	BALL	
Nam	e_	-EZSON HOWE NOAL HOLSING	570N	Season		05-0	۵۵_		
Note	:: 5	S - Satisfactory SI -			U - Un:	satisfac	tory N	A - Not A	pplicable
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	a. b. c. d. e. f. g.	Rapport with his/he Rapport with other Rapport with officia Rapport with paren	er staff sport coaches ls ts of athletes s Boosters nistration	(4	+++++++++++	()	()	( ) ( ) ( ) ( ) ( )	
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PSign Sign IF S I wi	( ) nat nat SAT II I	cure of Coach  CUSFACTORY:  De available to settle cure	Unsatisfactor Ving (Principal o	atisfactory LI	Mar ee)	Di	•	2/24/ 2/24/c	rovement

Sch	ool	EISONHOWER	Sport _	$\mathcal{B}$	BAS	1671	BAU			· · · · · · · · · · · · · · · · · · ·
Nan	ne _	TOM SANTO	Season		05	-06				Control of the contro
Noțe	e: S	S - Satisfactory SI - Needs Improv	ement 1	U - Unsa	atisfacto	ory NA	4 - Not .	Applicable		يون پريونۍ
PER	FO	RMANCE EVALUATION		S	SI	U	NA	·····		s' 
	a. b. c. d. e.	truction Has knowledge of the sport Has ability to teach knowledge Enthusiasm Has self-control and poise Control/Discipline of athletes Other		44668	( ) ( ) ( ) ( )	()	( ) ( ) ( ) ( )			And the second distriction of the continuous and districtions and districtions of the second districtions and the second districtions and the second districtions are second districtions are second districtions and the second districtions are second districtions and the second districtions are second d
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3.	a. b. c. d. e. f. g.	Rapport with athletes Rapport with his/her staff Rapport with other sport coaches Rapport with officials Rapport with parents of athletes Rapport with Sports Boosters Rapport with Administration Rapport with media Role model to athletes Other	( )	KE FEREGES	( ) ( ) ( ) ( ) ( ) ( )	()()()()()				
4.	a. b. c.	ministration Follows rules and policies Concern for health and safety of s Supervises students Follows proper channels Other	students	4555	( )	( ) ( ) ( ) ( )	()			
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Sig Sig IF I w	( ) mat mat SAT Illi	ture of Coach Unsatisfactor ture of Evaluator Peu The (Principal of	Satisfactory ()	nry->	( Da Da	) Ne te $2$ - ate $2$ -	16-06 14-06	provement E	94.C	Marti

RECEIVED MAR - 2 2005

School			Sport	B. B	aspet 13	ALL		1.74 6.8 8.
Name	DAVE S	SHERMAN	Season		5-06			er i e deservi
Noțe:	S - Satisfactor	y SI - Needs Impro	vement U -	Unsatisf	actory N	A - Not Applic	cable	ingeneral de la companya de la compa
PERF	RMANCE EVA	ALUATION	S	SI	U	NA		1
a. b. c. d.	Has ability to Enthusiasm Has self-cont Control/Disc	ge of the sport teach knowledge rol and poise ipline of athletes	(, (, (, (,	**************************************	( ) ( ) ( ) ( )	( ·) ( ) ( ) ( )		The second of the second distributions.
a. b. c. d.	Demonstrate	entory of equipment	(• () ()		( ) ( ) ( ) ( )	( ) ( ) ( ) ( )		And the second s
a. b. c. d. e. f. g.	Rapport with Rapport with Rapport with Rapport with Rapport with	n athletes n his/her staff n other sport coaches n officials n parents of athletes n Sports Boosters n Administration n media	( • ( • ( • ( • ( • ( • ( • ( • ( • ( •	++++++++	( ) ( ) ( ) ( ) ( ) ( )			
a. b. c. d.		health and safety of students	( (		( ) ( ) ( ) ( )	( ) ( ) ( ) ( )		
<i></i>	onal Commen S OUT WIT	H SVCH SHORT (Additiona	<u>νοπίε</u> . L c <del>omment</del> s α			Haping		
(	services were : )	/ Unsattlefecte	Satisfactory	>		eds Improve	ment	
a	ture of Coach	Then you	STOD V		Date 2	14-06		CA ON
. —	ture of Evalua	(Principal	or Designee)	<u> </u>	_Date		- NOY	2/20/06
I will	TISFACTORY: be available to ture		Yes ()	No <b>N</b>	ate2	20-8-06	<u>.</u>	1,1

Sch	1001 EISONHUWOR Sp	ort	BASK	LOTA,	All	
Nar	ne DAVE ALENSON Se	ason	05-0	6		
	e: S - Satisfactory SI - Needs Improvement	ent U - Un	satisfacto	ory N	A - Not Ap	plicable
PEI	RFORMANCE EVALUATION	S	SI	U	NA	·
1.	Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge c. Enthusiasm d. Has self-control and poise e. Control/Discipline of athletes f. Other	(5)	( ) ( ) ( ) ( )	()()()()	( ) ( ) ( ) ( ) ( )	·
2.	Organization  a. Well planned practices  b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports e. Other	(++ (++ (++ (+++++++++++++++++++++++++	( )	( ) ( ) ( ) ( )	( )	
3.	Personal Relationships a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes j. Other	(+) (+) (+) (+) (+) (+) (+) (+)				
4.	Administration  a. Follows rules and policies  b. Concern for health and safety of stud  c. Supervises students  d. Follows proper channels  e. Other	lents (4)	( ) ( ) ( ) ( )	( ) ( ) ( ) ( )	( )	
Ad	ditional Comments: GROFF S	CASON:	<u>!</u>			
Sig Sig IF	gnature of Coach displayed or D.  SATISFACTORY:  Onsatisfactory  Onsatisfactory  (Principal or D.)	sfactory  MANA  esignee)	Date Date Date Date Date Date Date Date		3-27-0	vement
	will be available to serve hexs year. Yes	No	( ) Date .	3	126/0	<u>16</u>

Sch	ool <u>EISEVAUUSE</u>	Sport _	<u> </u>	LA.	Ke	TBALL	
Nam	ne MIKE 10GUE	Season		5-06	,		
Note	e: S - Satisfactory SI - Needs Imp	rovement	U - Uns	atisfacto	ory	NA - Not	Applicable
PER	FORMANCE EVALUATION		S	SI	U	NA	
1	Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Enthusiasm  d. Has self-control and poise  e. Control/Discipline of athletes  f. Other		XXXXX)	( ) ( ) ( ) ( )	()()()	( ) ( ) ( ) ( )	
	Organization  a. Well planned practices  b. Care and inventory of equipme  c. Demonstrates punctuality  d. Record keeping and reports  e. Other	nt	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	( )	( ) ( ) ( ) ( )	( ) ( ) ( ) ( )	
	Personal Relationships a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coach d. Rapport with officials e. Rapport with parents of athlete f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes j. Other		14444441	( ) ( ) ( ) ( ) ( ) ( )	()()()()()	( ) ( ) ( ) ( )	
	Administration  a. Follows rules and policies  b. Concern for health and safety c. Supervises students d. Follows proper channels e. Other	•		( ) ( ) ( )	( ) ( ) ( ) ( )	( )	
Add	litional Comments: MIKE 15 K	AW EXCO	PLION	Mr C	OA	21-	
Sign	nr services were rated as: ( ) Unsatisfaction of Coach X. 744 Coach X. 1944 Coach X. 1	nal commer Satisfacto ctory ()	DITY	( Dat		3 -28	provement 06 06
I w	SATISFACTORY: ill be available to serve next year. nature	Yes ()	•	( ) _ Date _			

Sch			Sport _	<u>G.</u>	BASI	KETE	AU	
Nan	ne_	0 = .1	Season		05-			
Note	2: 3	S - Satisfactory SI - Needs Improve	ment	U - Uns	satisfa	ctory	NA - Not	Applicable
PER	CFO	RMANCE EVALUATION		S	SI	U	NA	•
	a. b. c. d.	Has knowledge of the sport Has ability to teach knowledge Enthusiasm Has self-control and poise		(X) (X) (X)	( )	( )	( ) ( ) ( )	
	f.	Control/Discipline of athletes Other		()	( )	( )	( )	•
	a. b. c.	ganization Well planned practices Care and inventory of equipment Demonstrates punctuality Record keeping and reports Other		(* (* ) (* ) (* ) (* ) (* ) (* ) (* ) (	()	( )	( ) ( ) ( ) ( )	
3.	a. b. c. d. e. f. g.	Rapport with officials Rapport with parents of athletes Rapport with Sports Boosters Rapport with Administration Rapport with media	( )	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	()()()()		( ) ( ) ( ) ( ) ( )	
	j.	Other		()	( )	( )	( )	
4.	a. b. c. d.	Iministration Follows rules and policies Concern for health and safety of st Supervises students Follows proper channels Other	udents	(XXXX) (XXXX)	( ) ( ) ( ) ( )	( ) ( ) ( )	( ) ( ) ( )	
		onal Comments: RT HAS G CUIREMENTS OF COACHING	ONE	up 1	4210	KEY	9/10 -	THE
	( )	Unsatisfactory	tisfacto	ts on th	ie bacl	•	Needs Im	ıprovement
Sig	nat	ture of Coach	1	······································		ate		
Sig	nat	ture of Evaluator // (Principal or	MAD 2	a a l	Γ	ate _;	3/23/	106
I w	ill t	TISFACTORY:	es (V	No.	( ) Date	g 3,	198 10	6
							<del></del>	<del></del>

School EISON HOWSE	Sport _	G.	BASK	STBA	u	
Name SKEET WILLIAMS	Season_	<del></del>	05-	06		_
Note: S - Satisfactory SI - Needs Improve						icable
PERFORMANCE EVALUATION		S	SI	U	NA	-
<ol> <li>Instruction         <ul> <li>a. Has knowledge of the sport</li> <li>b. Has ability to teach knowledge</li> <li>c. Enthusiasm</li> <li>d. Has self-control and poise</li> <li>e. Control/Discipline of athletes</li> <li>f. Other</li> </ul> </li> </ol>		(+++++	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( )	,
<ul> <li>Organization</li> <li>a. Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> <li>e. Other</li> </ul>		(Y (Y (Y (Y ()	()	( ) ( ) ( )	( ) ( ) ( ) ( )	
3. Personal Relationships a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes j. Other	( )	ヤナナナナナナナナ	()		( ) ( ) ( ) ( ) ( ) ( )	
<ul> <li>4. Administration</li> <li>a. Follows rules and policies</li> <li>b. Concern for health and safety of s</li> <li>c. Supervises students</li> <li>d. Follows proper channels</li> <li>e. Other</li> </ul>	tudents	(4)	( )	()()()	()	
Additional Comments: SKEET IS A AND DOES MORE THAN RE	AN EX	de more de la company	TONE	a c	OACH	_
(Additional	eomment atisfactor	s on th			eds Improv	ement
Signature of Evaluator Agricul (III)	<u>UNADOR</u>		Da	te <u>3/</u>	23/04	
(Principal o IF SATISFACTORY: I will be available to serve next year. Signature	Yes (4	N	4.)	*	28-06	

Sch	ool	EISENHOWOR	Sport	CHO	SERLE	TADINI	9 (W)	<u>NTOR</u> )
Nan	ne "	EISONHOWOR MOUSSA CARLSTROM	Season_		05-0	6		_
Noț	e: (	S - Satisfactory SI - Needs Improv	ement U	J - Uns	satisfact	ory NA	A - Not Ap	plicable
PEF	CTO	RMANCE EVALUATION	-	S	SI	U	NA	<del></del>
	a. b. c. d.	truction Has knowledge of the sport Has ability to teach knowledge Enthusiasm Has self-control and poise Control/Discipline of athletes Other		ととととし	( ) ( ) ( ) ( )	()()()	( ) ( ) ( ) ( ) ( )	
2.	a. b. c. d.	ganization Well planned practices Care and inventory of equipment Demonstrates punctuality Record keeping and reports Other		(+) (+) (+)	( ) ( ) ( ) ( )	( ) ( ) ( )	( )	
3.	a. b. c. d. e. f. g.	Rapport with athletes Rapport with his/her staff Rapport with other sport coaches Rapport with officials Rapport with parents of athletes Rapport with Sports Boosters Rapport with Administration Rapport with media Role model to athletes Other		というしょうようよう	( ) ( ) ( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( )		
4.	a. b. c.	ministration Follows rules and policies Concern for health and safety of s Supervises students Follows proper channels Other		1111	()	()	()	
Ad	diti	onal Comments: VORY NIC	€ 1015 471820 ;	WIT	HA	LOT	OF	
Va		(Additional					*	
	( )	Unsatisfactor	atisfactor	<u>y</u>	מה כיה כי		cus impr	ovement
Sig	gna	ture of Coach	ATTI	ZZA Vm –	Da Da	ate	120/11	<u>/</u>
Sig	gna	ture of Evaluator (Principal c	Thesians	Mars	In/D	ate 🙍	? <i>[20]</i> 06	
Ιv	zill i	TISFACTORY: be available to serve next year. ture	Yes X	n No	( ) Date	-2/s	<u>V/UY</u>	

# REDENCED ARK TORRE

#### Appendix C

School	E)SOVIOWOR	Sport	W	l857U/N	4
Name_	GREG BARNETT	Season_		05-06	)
Noțe: S	S - Satisfactory SI - Needs Improv	ement (	J - Unsa	atisfactory	NA - Not Applicable
PERFO	RMANCE EVALUATION	-	S	SI U	NA
a. b. c. d.	truction Has knowledge of the sport Has ability to teach knowledge Enthusiasm Has self-control and poise Control/Discipline of athletes Other		115-11		( ) ( ) ( ) ( ) ( )
a. b. c.	ganization Well planned practices Care and inventory of equipment Demonstrates punctuality Record keeping and reports Other		ナーナナナ	() (	) () ) () ) () ) ()
a. b. c. d. e. f.	rsonal Relationships Rapport with athletes Rapport with his/her staff Rapport with other sport coaches Rapport with officials Rapport with parents of athletes Rapport with Sports Boosters Rapport with Administration Rapport with media Role model to athletes Other	183	++++++++++		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
a. b. c. d.	Concern for health and safety of	students	とまますす	() (	) ( ) ) ( ) ) ( ) ) ( )
Additi	onal Comments:	<del>, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>			
( )	(Additional services were rated as: Suppose ture of Coach	Satisfacto		Date_	Needs Improvement
Signa	ture of Evaluator 2. 13	lu L		Date	3-8-06
I will	(Principal (Principal) TISFACTORY: be available to serve next year. ture	Yes ()	No	( ) Date	



School	BISONIUM	Sport _	- W	RESTC	iNG		
Name _	TRAVIS HVMMELE	Season		05-0	<u>)                                    </u>		_
Noțe: S	S - Satisfactory SI - Needs Improv	zement	U - Unsa	ıtisfactor	y NA	- Not Appl	icable
PERFO	RMANCE EVALUATION	-	S	SI	U	NA	<del>-</del>
a. b. c. d.	truction Has knowledge of the sport Has ability to teach knowledge Enthusiasm Has self-control and poise Control/Discipline of athletes Other		ととととさ	() () () () ()	( ) ( ) ( ) ( )	( ) ( ) ( ) ( )	
a. b. c.	ganization Well planned practices Care and inventory of equipment Demonstrates punctuality Record keeping and reports Other		1) + + +	( ) ( ) ( ) ( )	( ) ( ) ( )	(† () ()	
a. b. c. d. e. f. g.	Rapport with athletes Rapport with his/her staff Rapport with his/her staff Rapport with other sport coaches Rapport with officials Rapport with parents of athletes Rapport with Sports Boosters Rapport with Administration Rapport with media Role model to athletes Other	( )	111-111		( ) ( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( )	
a. b. c. d.	ministration Follows rules and policies Concern for health and safety of Supervises students Follows proper channels Other	students	进步	( ) ( ) ( ) ( )	( ) ( ) ( ) ( )	( )	
Additi	onal Comments:				··		_
( )		Satisfact		e back) ( Date		eds Improv	
Signat	ture of Evaluator 2 1	Bly	2	Dat	e <u> </u>	8-06	<del></del>
I will !	(Principal INSFACTORY: be available to serve next year. ture			( ) Date	3-	-8-06	

School	E)SON HOWOR	Sport		WRES		G .	
Name_	EISON HOWER KEN WOODBURN	Season	1	05	-06		<del>-</del>
Noțe: S	S - Satisfactory SI - Needs Improv	vement	U - Unsa	atisfactor	y NA	- Not App	licable
PERFO	RMANCE EVALUATION		S	SI	U	NA	_
a. b. c. d.	Has knowledge of the sport Has ability to teach knowledge Enthusiasm Has self-control and poise Control/Discipline of athletes Other		ナナナナナナ	( ) ( ) ( ) ( ) ( )	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( )	
a. b. c. d.	ganization Well planned practices Care and inventory of equipment Demonstrates punctuality Record keeping and reports Other		ナナナナ	( ) ( ) ( ) ( )	( )		
a. b. c. d. e. f.	Rapport with his/her staff Rapport with other sport coaches Rapport with officials Rapport with parents of athletes Rapport with Sports Boosters	( )	£++++++++		()()()()()	( ) ( ) ( ) ( ) ( ) ( )	
a. b. c. d.	lministration Follows rules and policies Concern for health and safety of Supervises students Follows proper channels Other	student	s It It	()	( ) ( ) ( ) ( )	() () () ()	
Additi	ional Comments:				-		<del></del>
( )	(Additional services were rated as:  Unsatisfacto ture of Coach	Satisfact		į		eds Impro	
Signa	ture of Evaluator	41		Dat	e	7-8-00	» ——
I will	(Principal TISFACTORY: be available to serve next year. ture	_		() Date	3 -	8-06	

e: S - Sarisfactory SI - Needs Improvement T	J - Unsatu	factory	NA - No	ot Applic	able
REFORMANCE EVALUATION		S	SI	U	NA
Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Enthusiasm  d. Has self-control and poise		3333	() () () ()	() () ()	() () ()
e. Control/Discipline of athletes  f. Other accepts responsible	45	(i)	()	G <sub>e</sub>	()
Organization  a. Well planned practices  b. Care and inventory of equipment  c. Demonstrates punctuality  d. Record keeping and reports  e. Other			()	()	() () () ()
Personal Relationships  a. Rapport with athletes  b. Rapport with his/her staff  c. Rapport with other sport coaches  d. Rapport with officials  e. Rapport with parents of athletes  f. Rapport with Sports Boosters  g. Rapport with Administration  h. Rapport with media  i. Role model to athletes  j. Other	(نسو	2434345			
Administration  Tollows rules and policies  Concern for health and safety of suident  C. Supervises students  G. Follows proper channels  C. Other	İ <b>S</b>	3333 3333	()	() () () ()	() () () () ()
Additional Comments Todal has &	wen	000	1 0	J 0	edditie Faut
Your services were rated as: Sarisfactory		eds Impr	ovenent	() ~	Unsatisfactory
Signature of Coach Signature of Evaluator (Principal of	D/L		Date		efoc

#### WARREN COUNTY SCHOOL DISTRICT

### Warren, Pennsylvania COACH EVALUATION FORM

School	Sheffield	Area Middle Hi	gh School	Sport	Boys' Basketball		
Name		Norris, Steve		Season			
Note: S-Sa	itisfactory	SI - Needs Im	provement	U - Unsatisfac	ctory N	NA - Not App	olicable
PERFORMAN	ICE EVALU	ATION		s	SI	U	NA
b. Has abili c. Enthusia d. Has self-	wledge of the ty to teach k sm control and Discipline of	nowledge poise		X X X X	() () () () ()	( ) ( ) ( ) ( )	() () () () ()
2. Organizatio	<u>on</u>						
b. Care and c. Demons	nned praction d inventory of trates punctive eeping and	f equipment uality		X X X ()	( ) ( ) ( ) ( )	() () () ()	() () () ()
3. Personal R	elationships						
b. Rapport c. Rapport d. Rapport e. Rapport f. Rapport g. Rapport h. Rapport	with athleter with his/her with other s with officials with parents with Sports with admini with media odel to athelt	staff port coaches s of atheltes Boosters stration		X X X X X X X	() () () () () () () ()	() () () () () () ()	() () () () () () ()
4. Administra	tion						
b. Concerr c. Supervi	rules and pon ofr health a ses students proper char	and safety of stu-	dents	X X X ( )	( ) ( ) ( ) ( )	() () () ()	( ) ( ) ( ) ( )
Your service	s were rates	as: Satisfacto	ory(X) Ne	eds Improveme	nt() L	Jnsatisfactor	y ( )
IF SATISFA I will be avail Signature	able to serv	e next year:	Yes	Non-	Date	No() e: <u>3-/</u> e: <u>3-8</u>	15-06 -06
		7 6	<del>//</del>				

2005 - 2006

Coach Norris has demonstrated his sincere concern for the personal success of his student-athletes. He has gone "above and beyond" in regard to help each of his charges to attain their personal best and keep them involved in a wholesome program.

Coach Norris always exhibits a professional decorum regardless of the circumstances. He treats his players, our guests and game officials with digit and respect at all times.

Coach Norris has made difficult decisions when necessary. When our team need leniency and a guiding hand, coach Norris provided it. But when disciplinary measures were called for, he addressed issues promptly and fairly.

Our record has improved and we have every reason to expect continued improvement.

: S - Sansfactory SI - Needs Improvem	Season nent U-Unss				able	
FORMANCE EVALUATION		S	SI	U	NA	-
Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Enthusiasm  d. Has self-control and poise  e. Control/Discipline of athletes  f. Other Follows program		003333	850000	() () () () ()	() () () () ()	
Organization  a. Well planned practices  b. Care and inventory of equipment  c. Demonstrates punctuality  d. Record keeping and reports  e. Other		(4) (4) (4)		()	() () () ()	
Personal Relationships  a. Rapport with athletes  b. Rapport with his/her staff  c. Rapport with other sport coaches  d. Rapport with officials  e. Rapport with parents of athletes  f. Rapport with Sports Boosters  g. Rapport with Administration  h. Rapport with media  i. Role model to athletes  j. Other		(4) (4) (4) (4) (4) (4) (4) (4) (4) (4)			00000303000	
Administration  a. Follows rules and policies  b. Concern for health and safety of st  c. Supervises students  d. Follows proper channels  e. Other	tudents		00000	()	() () () ()	
Additional Comments Coller  John St. Jak St. (Additional Control of the St.)	Ahmi Hich ional comme	ors on the	back)	den	e de h	~
Your services were rated as: Satisfact	ory (X)	Veeds Im	provenen	t ()	Unsatisfactor	У
Signature of Coach			Date	<u> </u>	<u> </u>	

hool Sheffeeld H.S. Sport_ ame Jerony Small Season	<u>In 1</u>	45/L 05-	   Bri   C	73 B.B
ote: S - Sanisfactory SI - Needs Improvement U - Unsa	risfactory	NA - No	ot Applic	able
ERFORMANCE EVALUATION	S	SI	U	NA
Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Enthusiasm  d. Has self-control and poise  e. Control/Discipline of athletes  f. Other FIRST Year	# (3/2) (3/2)	()	()	() () () () ()
Organization  a. Well planned practices  b. Care and inventory of equipment  c. Demonstrates punctuality  d. Record keeping and reports  e. Other Punctual Anguence	333	()	()	() () () ()
3. Personal Relationships a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes j. Other	विकेष्टिक विकास के विकास कर किया किया किया किया किया किया किया किया			
4. Administration  a. Follows rules and policies  b. Concern for health and safety of students  c. Supervises students  d. Follows proper channels  e. Other  Additional Comments	(4) (4) (4) (1)		() () () ()	() () () () () 
(Additional comme				
Your services were raied as: Satisfactory (V) N  Signature of Coach  Signature of Evaluator (Principal or Design  IF SATISFACTORY: I will be available to serve next year.  Yes		Date  No ()	3/	Unsatisfactory

BECEIVED ART - 3 2006

### WARREN COUNTY SCHOOL DISTRICT Warren, Pennsylvania COACH EVALUATION FORM

School	Sheffield	Area Middle High School	Sport_		Basketbali	
Name		Lee Goldthwaite	Season _		05-06	4
Note: S-Satis	factory	SI - Needs Improvement	U - Unsatisfa	ctory	NA - Not App	olicable
PERFORMANCE	EVALU#	TION	s	SI	U	NA
1. Instruction a. Has knowle b. Has ability t c. Enthusiasm d. Has self-col e. Control/Disc f. Other	o teach kn ntrol and p	owledge oise	x x x x x	() () () () ()	( ) ( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( )
2. Organization						
<ul><li>a. Well planne</li><li>b. Care and in</li><li>c. Demonstrat</li><li>d. Record kee</li><li>e. Other</li></ul>	ventory of es punctu	equipment ality	x x x ( )	( ) ( ) ( ) ( )	() () () ()	()()()
3. Personal Rela	ntionships					
a. Rapport wit b. Rapport wit c. Rapport wit d. Rapport wit f. Rapport wit g. Rapport wit h. Rapport wit l. Role mode J. Other	th his/her she hother spector officials the parents the Sports Eth adminis the media	ort coaches of atheltes Boosters tration	x x x x x x x x	() () () () () () () ()	() () () () () () ()	() () () () () () ()
4. Administration	<u>n</u>					
<ul><li>a. Follows rul</li><li>b. Concern for</li><li>c. Supervises</li><li>d. Follows pro</li><li>e. Other</li></ul>	r health ai students	nd safety of students	x x x ()	() () () ()	( ) ( ) ( ) ( )	( ) ( ) ( ) ( )
Your services w	ere rates	as: Satisfactory(x) N	eeds Improveme	ent ( )	Unsatisfactor	y ( )
IF SATISFACTO		0/01/	×		No ( )	2 0/
Signature of	Coach:	De Goldon	wave	Da	te: <u>3- /7</u> te: <u>3 - 8</u>	1_06
Signature of Ev	aluator:	1941/	and the same of th	_ Da	te: <u>&gt; - 8</u>	<u>-06</u>

#### Winter 05-06

Coach Goldthwaite has had a positive inaugural season with our Lady Wolverine Basketball team. After experiencing a series of coaching changes, our girls seemed to be looking for stability. Coach Goldthwaite seems to be willing to provide that.

Coach Goldthwaite has a fine rapport with his team. It is noteworthy that Coach Goldthwaite uses a "hands-off" approach when working with his female student-athletes. This is critical and we commend Coach Goldthwaite and encourage him to maintain same.

Coach Goldthwaite was very cooperative with the athletic administration. He regularly contacted the school and was available when needed.

Coach Goldthwaite took his team to the District 9 playoffs this season. We would encourage Coach Goldthwaite to stay current with basketball fundamentals, drills and schemes so as to keep his teams successful.

School SAMSHS	_Sport(	GRIS	BAS	Keft	A11	
Name TRACIE MORRISON	Season _	200	5-2	o e <b>6</b>		
Note: S - Satisfactory SI - Needs Improvement			NA - No	ot Applic	able	· · · · · · · · · · · · · · · · · · ·
PERFORMANCE EVALUATION		S	SI	U	NA	
1. Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Enthusiasm  d. Has self-control and poise  e. Control/Discipline of athletes  f. Other		080880	000000	() () () ()	()	
<ol> <li>Organization</li> <li>Well planned practices</li> <li>Care and inventory of equipment</li> <li>Demonstrates punctuality</li> <li>Record keeping and reports</li> <li>Other</li> </ol>		0088	()	()	() () () ()	
a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes j. Other		0800080888				
				() () () () ()	() () () () () ()	ENERT
Your services were rated as: Sanisfactory Signature of Coach All of Signature of Evaluator		æds Impr		0.	Unsatisfa	cory ()
IF SATISFACTORY: I will be available to serve next year.	Yes (	) 1	No ()	ite.		

## WARREN COUNTY SCHOOL DISTRICT Warren, Pennsylvania COACH EVALUATION FORM

School Shemeld Area Middle High School			Sport_	Winter Cheer - Basketball				
Name	Proga	r-Wilson, Julie	Season_		05-06			
Note: S-Satis	sfactory SI	- Needs Improvement	U - Unsatisfa	ctory	NA - Not App	olica ble		
PERFORMANC	E EVALUATIO	ON	s	SI	U	NA		
	to teach knowl	edge	X X X X ()	() () () () ()	( ) ( ) ( ) ( ) ( )	() () () () ()		
2. Organization								
c. Demonstra	ed practices nventory of equ tes punctuality eping and repo		X X X ()	()	( ) ( ) ( ) ( )	()		
3. <u>Personal Rel</u>	ationships							
c. Rapport wi d. Rapport wi e. Rapport wi f. Rapport w	th his/her staff th other sport of th officials ith parents of a ith Sports Boo ith administrati ith media	coaches atheltes sters	X X X () X X () X	() () () () () () ()	() () () () () () ()	() () X () () X ()		
4. Administration	<u>on</u>							
b. Concern for c. Supervise		safety of students	X X X ()	() () () ()	( ) ( ) ( ) ( )	() () () ()		
Your services \	were rates as:	Satisfactory ( X ) No	eeds Improveme	ent ( )	Unsatisfactory	y ( )		
IF SATISFACT I will be available Signature o	ole to serve ne	xt year:	Jon	Da	No()	-06		
Signature of E	77	Tant a		Da	nte: <u>3 - 2 -</u>	-06 -06		
J.9.12.010 01 E				-				

Coach Progar-Wilson has demonstrated a concern for our student-athletes who participate in our cheer program

Coach Progar-Wilson maintains safe, tasteful routines with our cheerleaders. They have always been sportsmanlike in their cheers. Coach Progar-Wilson maintains sound discipline with her student-athletes.

Coach Progar-Wilson has addressed the more significant issues of concern in her association with our cheer program. We are fortunate to have her overseeing our cheerleaders during the winter season.

me Nool Sport Season  te: S - Satisfactory SI - Needs Improvement U - Uns	2000 artisfactory			ab <b>ic</b>	
REFORMANCE EVALUATION	S	SI	U	NA	
Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Enthusiasm  d. Has self-commol and poise  e. Control/Discipline of athletes  f. Other	88880	() () () () ()	() () () () ()	() () () () ()	
Organization  a. Well planned practices  b. Care and inventory of equipment  c. Demonstrates punctuality  d. Record keeping and reports  e. Other	(X) (X) (X) (Y)	() () () () ()	()	() () () ()	
Personal Relationships  a. Rapport with athletes  b. Rapport with his/her staff  c. Rapport with other sport coaches  d. Rapport with officials  e. Rapport with parents of athletes  f. Rapport with Sports Boosters  g. Rapport with Administration  h. Rapport with media  i. Role model to athletes  j. Other	CECESESES	() () () () () ()			
4. Administration  a. Follows rules and policies  b. Concern for health and safety of students  c. Supervises students  d. Follows proper channels  e. Other  Additional Comments:	88880	()	() () () ()	() () () ()	
(Additional comme					
Your services were rated as: Satisfactory (X)	Needs Impr		()	Unsatisfac	tory
Signature of Coach  Signature of Evaluator (Principal or Designation (	næ)	Date	3-26	, 06	
IF SATISFACTORY: I will be available to serve next year. Yes	() ×	No ()			

### WARREN COUNTY SCHOOL DISTRICT Warren, Pennsylvania COACH EVALUATION FORM

School Sheffield Area Middle High School	Sport	Wrestling	···
Name Smead, Tony	Season	05-06	
Note: S-Satisfactory SI - Needs Improvement	U - Unsatisfactor	y NA - Not Ap	plicable
PERFORMANCE EVALUATION	s s	SI U	NA
1. Instruction a. Has knowledge of the sport b. Has ability to teach knowledge c. Enthusiasm d. Has self-control and poise e. Control/Discipline of athletes f. Other	X ( X ( X ( X (	) () ) () ) () ) () ) ()	( ) ( ) ( ) ( )
2. <u>Organization</u>			
<ul><li>a. Well planned practices</li><li>b. Care and inventory of equipment</li><li>c. Demonstrates punctuality</li><li>d. Record keeping and reports</li><li>e. Other</li></ul>	X ( X ( X (	) () ) () ) () ) ()	( ) ( ) ( ) ( )
3. Personal Relationships			
<ul> <li>a. Rapport with athletes</li> <li>b. Rapport with his/her staff</li> <li>c. Rapport with other sport coaches</li> <li>d. Rapport with officials</li> <li>e. Rapport with parents of atheltes</li> <li>f. Rapport with Sports Boosters</li> <li>g. Rapport with administration</li> <li>h. Rapport with media</li> <li>l. Role model to atheltes</li> <li>J. Other</li> </ul>	X ( X ( X ( X ( X ( X ( X ( X (	() () () () () () () () () ()	() () () () () () ()
4. Administration			
<ul><li>a. Follows rules and policies</li><li>b. Concern for health and safety of students</li><li>c. Supervises students</li><li>d. Follows proper channels</li><li>e. Other</li></ul>			() () ()
Your services were rates as: Satisfactory ( X ) New	eds Improvement (	) Unsatisfactor	у()
IF SATISFACTORY: I will be available to serve next year:  Signature of Coach:  Yes (		No() Date: 3 15	-06
Signature of Evaluator:		Date: 3 1 1 1	-06
		***************************************	

Coach Smead must be commended for his energy and enthusiasm in maintaining our wrestling program. Having been on probation it was imperative that we have a success off-season and recruiting effort. Mr. Smead provided both.

Coach Smead no only maintained our program, but he has taken us back to the PIAA State Championships.

Coach Smead has remained current with wrestling skills and techniques. His wrestlers benefit from an up to date wrestling program. Our kids are generally well prepared for their competition.

Coach Smead maintained a healthy team this year. Coach Smead must be commended for our student-athletes' healthy season. Weight related issues never surfaced this year. We encourage Mr. Smead to keep us current and informed with the new PIAA regulations as they are introduced next year.

With our junior high wrestling program on probation, it is paramount that we RECRUIT young wrestlers in the off season. Student-athletes must be attracted and a positive atmosphere must be created for our junior high wrestling program.

School Warren High Sport	Boy	<u>s' Ba</u>	skeft	ra l(
Name Jeff Bevine Season	<u>u</u>	الدو	n 06	>
Number of Years of Service as: Head Coach	<u>-</u>	Assista	at Coach	- Marie Control of the Control of th
Note: S - Satisfactory SI - Needs Improvement U - Unsa	tisfactory	NA-N	iot Appli	cable
PERFORMANCE EVALUATION	S	SI	U	NA
1. Instruction a Has knowledge of the sport b. Has ability to teach knowledge c. Enthusiasm d. Has self-control and poise e. Control/Discipline of athletes	XXX	() () () ()	() () () ()	~() () () ()
<ul> <li>Organization</li> <li>a Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>	XX	() () ()	()	() () () ()
3. Personal Relationships a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes	XXXXXXXXX	() () () () () ()	() () () () () ()	() () () () () () ()
4. Administration  a. Follows rules and policies  b. Concern for health and safety of students  c. Supervises students  d. Follows proper channels  '	XXXX	()	() () () ()	() () () ()
Additional Comments: Ongratulations	an.	an_	out	tarting
Deason and Making to (Additional comments of	n the bac	<i>(2/1)</i>	eg e e	ffs.
	s Improv		3/1/ 3/1/	satisfactory ()
IF SATISFACTORY: Principal's Signature		-	-, ,	-
I will be available to serve next year.  Yes X Signature	No	() Date _	3/	106

### WARREN COUNTY SCHOOL DISTRICT Warren, Pennsylvania KECEIVED MAR 2 3 2006

Sch	ool_	WARTEN ARRA HS	Sport _	B	oys 1	Saske	tball_	
Nan	ne _	JOC MCGRAW	Season _		05-0	ا کا کا		<del></del>
Nur	nbe	r of Years of Service as: Head Coach	4× 6000	10	Assistar	nt Coach		
Not	e: \} 	S - Satisfactory SI - Needs Improvement U	- Olisai.	isiacumy	. IVA -1.	O ADOR	CAURO .	
PEI	RFC	DRMANCE EVALUATION		S	SI	U	NA NA	
1.	a. b. c.	truction  Has knowledge of the sport  Has ability to teach knowledge  Enthusiasm  Has self-control and poise  Control/Discipline of athletes		88888	() () () ()	()	~() () () ()	
2.	Or a h c d	Well planned practices Care and inventory of equipment Demonstrates punctuality Record keeping and reports		(X) (X) (X)	() () ()	()	() () ()	
3.	а b. с	Rapport with athletes Rapport with his/her staff Rapport with other sport coaches Rapport with officials Rapport with parents of athletes Rapport with Sports Boosters Rapport with Administration Rapport with media Role model to athletes		88888888	() () () () () () ()	() () () ()	() () () () () () ()	
4,	a b. c	Follows rules and policies Concern for health and safety of students Supervises students Follows proper channels	1	(X) (X) (X)	() () ()	() () ()	() () ()	
Ad	ditio	onal Comments:						
_		(Additional cor	nments c	n the ba	ck)			
Si	goat	ure of Evaluator  Satisfactory (X)				() U 3-9 3-	nsatisfactory - 9 - 0 (	()
	-	Principal's Signature TISFACTORY:						
		be available to serve next year.  Year	'es ()	No	) (j) Date	<u> 3-</u>	9-06	-

### WARREN COUNTY SCHOOL DISTRECEIVED MAR 2 3 2008 Warren, Pennsylvania

School WARREN AREa HS	Sport	ys_	BASKe	tball			
School WARREN AREa HS Sport Boys Basketball  Name Dave Papalia Season 05-06							
Number of Years of Service as: Head Coach _							
Note: S - Satisfactory SI - Needs Improvement U - Unsatisfactory NA - Not Applicable							
PERFORMANCE EVALUATION	S	SI	U	NA			
Instruction     a Has knowledge of the sport     b. Has ability to teach knowledge     c Enthusiasm     d. Has self-control and poise     e. Control/Discipline of athletes	(X) (X) (X)	() () () ()	()	<pre>() () () () ()</pre>			
<ul> <li>2. Organization</li> <li>a. Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>	(X) (X) (X)	() () ()	( ) .	() () ()			
3. Personal Relationships a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes	(%) (%) (%) (%) (%)	() () () () () () ()	()	() () () () () () ()			
4. Administration  a Follows rules and policies  b. Concern for health and safety of students  c. Supervises students  d. Follows proper channels  Administration	(X) (X) (X) (X)	()	()	() () ()			
Additional Comments:	`	٠,					
(Additional com	ments on the bac						
Your services were rated as: Satisfactory (\$\infty\$	Needs Improve			satisfactory ()			
Signature of Coach Joly 1944		_Date_	-> ,	N= 01			
Signature of Evaluator Principal's Signature		_Date .	_>_/	<u> </u>			
IF SATISFACTORY:							
I will be available to serve next year	Mo Mo	()					
Signature		_ Jak					

Warren, Pennsylvania RECEIVED MAR 2 3 2006 COACH EVALUATION FORM

School Warren	_Sport	Girls	<u> </u>	SKelk	<u> </u>	
School Name Sport Girls Basketbull  Name Amy Chase Season 2005 - 2006						
Number of Years of Service as: Head Coach	······································		Assistar	it Coach	3	
Note: S - Satisfactory SI - Needs Improvement	U - Unsatis	sfactory	NA-N	ot Applic	able	
PERFORMANCE EVALUATION		S ,	SI	U	NA	
Instruction     a Has knowledge of the sport     b. Has ability to teach knowledge     c. Enthusiasm     d. Has self-control and poise     e. Control/Discipline of athletes		(Y) (Y) (Y) (Y) (Y)	() () () ()	() () () ()	() () () ()	
<ul> <li>2. Organization</li> <li>a Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>		3000	()	()	() () () ()	
3. Personal Relationships a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	() () () () () () ()	() () () () () ()	() () () () () ()	
<ul> <li>4. Administration</li> <li>a. Follows rules and policies</li> <li>b. Concern for health and safety of students</li> <li>c. Supervises students</li> <li>d. Follows proper channels</li> </ul> Additional Comments:	1	(Y (Y (Y	()	()	() () ()	
				·		
(Additional co				' \ IT-	satisfactory ()	
Your services were rated as: Satisfactory (	y Needs	•	ement ( _Date	2/11	-/06	
Signature or coach	den se		_Date _	2/21/	106	
Signature of Evaluator Principal's Signature  IF SATISFACTORY:						
I will be available to serve next year.	Yes ()	No	()			
Signature Impolnase			_ Date _	. <u>.</u>		

School Warren High	Sport Onk	Bask	ethan	<u> </u>	
Name Matt Midigan	Season W	Noir	06	***************************************	
Number of Years of Service as: Head Coach _	<u>X</u>	Assistar	nt Coach		
Note: S - Satisfactory SI - Needs Improvement 3	U - Unsatisfactory	NA - N	lot Appli	cable	
PERFORMANCE EVALUATION	S	SI	U	NA	
<ol> <li>Instruction</li> <li>a Has knowledge of the sport</li> <li>b. Has ability to teach knowledge</li> <li>c Enthusiasm</li> <li>d Has self-control and poise</li> <li>e Control/Discipline of athletes</li> </ol>	XX	()	() () () ()	~() () () ()	
<ul> <li>2. Organization</li> <li>a. Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>	XXX	() () ()	()	() () ()	
3. Personal Relationships a Rapport with athletes b. Rapport with his/her staff c Rapport with other sport coaches d Rapport with officials e Rapport with parents of athletes f Rapport with Sports Boosters g Rapport with Administration h Rapport with media i Role model to athletes	XXXXXXX	() () () () () () ()	() () () () () ()	() () () () () ()	
4. Administration  a. Follows rules and policies  b. Concern for health and safety of students  c. Supervises students  d. Follows proper channels		() () () ()	() () () ()	() () () ()	
Additional Comments: (Myssettlels)  Additional comments (Additional con	mments on the bac	k)			
Your services were rated as: Satisfactory	Needs Improv	ement	() Ui	nsatisfactor	ry ()
Signature of Coach  Signature of Evaluator  Principal's Signature  IF SATISFACTORY:	1.0	_Date _ _Date _	3//	106	
I will be available to serve next year.  Signature Matter A Madigan	es () No		3/15	1/06	

School Warren High	Sport (hee	rlace	كاربخ		······································
Name Wendy Carrington	Season <u>U</u>	MA		<i></i>	
Number of Years of Service as: Head Coach _		Assista	at Coach	! <u></u>	<del></del>
Note: S - Satisfactory SI - Needs Improvement U	J - Unsatisfactory	NA-1	lot Appli	cable	
PERFORMANCE EVALUATION	S	SI	U	NA	
Instruction     A Has knowledge of the sport     Has ability to teach knowledge     Enthusiasm     Has self-control and poise     Control/Discipline of athletes	XXXXX	() () () ()	() () () ()	() () () ()	
<ul> <li>Organization</li> <li>a Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>	XXX	() () ()	()	()	
3. Personal Relationships a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes	XXXXXXXX	() () () () () ()	() () () () () ()	() () () () () ()	
<ul> <li>4. Administration</li> <li>a. Follows rules and policies</li> <li>b. Concern for health and safety of students</li> <li>c. Supervises students</li> <li>d. Follows proper channels</li> </ul>	XXX	()	() () ()	() () () ()	
Additional Comments:					
(Additional cor	nments on the bac	<u>'</u> '')			
Your services were rated as: Satisfactory X Signature of Coach Wlady Avus Signature of Evaluator Principal's Signature  IF SATISFACTORY:	Needs Improv	rement _DateDate _	() Ui 3/12 3/8	isatisfactor 0 / 0 / 0 1 / 0 / 6	y () 
I will be available to serve next year.	iss M No		3- <i>13</i> -	06	
Signature William Council	-1				

School Warren Arla	Sport Cheen	lead	cig		· · · · · · · · · · · · · · · · · · ·
School Warren Area Name Shona - Hagerty	Season Fall 4	MIN	er (	Fres	hmer
Number of Years of Service as: Head Coach_		Assistar	t Coach	1 2	<u>ir.</u>
Note: S - Satisfactory SI - Needs Improvement	U - Unsatisfactory	NA - N	ot Applic	able	
PERFORMANCE EVALUATION	s	SI	U	NA	•
Instruction     A Has knowledge of the sport     Has ability to teach knowledge     Enthusiasm     Has self-control and poise     Control/Discipline of athletes	(3) (3) (3) (3)	() () () ()	() () () ()	*() () () ()	
<ul> <li>Organization</li> <li>a Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>	(v) (v) (v)	() () ()	() () ()	() () ()	
3. Personal Relationships a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes	(a) (b) (b) (b) (d) (d) (d)	() () () () () ()	() () () () () () () () () () () () () (	()	
4. Administration  a. Follows rules and policies  b. Concern for health and safety of students  c. Supervises students  d. Follows proper channels	(1) (1) (1) (2)	() () () ()	() () () ()	() () () ()	Š
es a Knowledgeble	reliable mments on the bac	COA	J.		
Your services were rated as: Satisfactory	Needs Improv		() Un:	satisfacto	жy ()
Signature of Coach Wendy Carry	Hu	_Date _s	2/16/	06	
Signature of Evaluator		_Date _		· · · · · · · · · · · · · · · · · · ·	
Principal's Signature IF SATISFACTORY:					
I will be available to serve next year.	res 😥 No	()			
Signature Shana Hagerty	7	Date _	2-16	-04	>

School Warren Area	Sport Chee	rlead	10	. ,	
Name Jen Stover	Season Win	ter (	neer	leading	<u>(</u> J
Number of Years of Service as: Head Coach		Assista	at Coach	<u> </u>	
Note: S - Satisfactory SI - Needs Improvement	U - Unsatisfactor	y NA-1	iot Appli	cable	-
	C	CT	U	NA ·	
PERFORMANCE EVALUATION	S	SI	U	1384	
<ol> <li>Instruction</li> <li>Has knowledge of the sport</li> <li>Has ability to teach knowledge</li> <li>Enthusiasm</li> <li>Has self-control and poise</li> <li>Control/Discipline of athletes</li> </ol>	() (y) (y)	() () () ()	() () () ()	~() () () ()	
<ul> <li>Organization</li> <li>a Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>	(A) (A) (A)	()	()		
3. Personal Relationships a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes	(A) (A) (A) (A) (A) (A) (A) (A) (A) (A)	() () () () () ()	() () () () () ()	() () () () ()	
4. Administration  a. Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels  Additional Comments: Lea has year		() () () () reat	() () () ()	() () () ()	
her first year Coachine (Additional CO		ladis ack)	91		
Your services were rated as: Satisfactory				nsatisfactory	()
Signature of Coach Weldy Carren		Date _			_
Signature of Evaluator	J .	Date _			
Principal's Signature  FSATISFACTORY:		-	•		
	Yes (/ N	o ()			
Signature Jenny Stoves		Date	2-1	1-06	

# WARREN COUNTY SCHOOL DISTRICT RECEIVED MAR 2 3 2005

School UAC	ren	_Sport	$-\mathbf{U}_{C}$	حصه			<del></del>
Name A/2	ah clark	_ Season _	<u> </u>	<u>00 T-2</u>	roop		
Number of Years o	f Service as: Head Coach			Assistan	t Coach	<u> </u>	<u>40</u>
Note: S - Satisfacto	ory SI - Needs Improvement	U - Unsati	sfactory	NA - N	ot Applic	able	
PERFORMANCE	EVALUATION		s	SI	U	NA	
b. Has ability c. Enthusiasm d. Has self-co	edge of the sport to teach knowledge to trace and poise scipline of athletes		みのもなめ	() () () ()	() () () ()	() () () ()	
b. Care and in c. Demonstra	ned practices nventory of equipment ates punctuality eping and reports		かかけた	() () ()	() () ()	() () ()	
b. Rapport w c. Rapport w d. Rapport w e. Rapport w f. Rapport w g. Rapport w h. Rapport w	tionships ith athletes ith his/her staff ith other sport coaches ith officials ith parents of athletes ith Sports Boosters ith Administration ith media el to athletes		SCEPTION OF	() () () () () ()	() () () () () () ()	() () () () () ()	
<ul><li>b. Concern f</li><li>c. Supervise</li></ul>	on ules and policies for health and safety of students is students proper channels	ts 1	9500	() () ()	() () ()	() () ()	
Additional Comme	ents:				-	-	
	(Additional	comments o	n the ba	ck)	····		
Your services were	e rated as: Satisfactory	() Need	ls Impro	vement	() U	nsatisfactor	у ()
Signature of Coac	h from Dis	<u> </u>		Date _	d-0	<u> 40-6</u>	
Signature of Evalu	Principal's Signature			Date _			
I will be available Signature	to serve next year.	Yes (b)		) () Date	<u> 8-7</u>	<u>13-06</u>	

School Lisa Grosch	Sport _	Swi	מן דות נו	<u> </u>		
Shall Warrend High	_Season _		<u> </u>	أساسا	<u>fec</u>	
Number of Years of Service as: Head Coach	٩	_		nt Coach	. <u> </u>	
Note: S - Satisfactory SI - Needs Improvement	U - Unsat	isfactory	NA-1	Not Appli	cable	
PERFORMANCE EVALUATION		S	SI	U	ÑA	
Instruction     a Has knowledge of the sport     b. Has ability to teach knowledge     c. Enthusiasm     d. Has self-control and poise     e. Control/Discipline of athletes		XXX	() () () ()	() () () ()	*() () () () ()	
<ul> <li>Organization</li> <li>a. Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>		XXX	() () ()	()	()	
3. Personal Relationships a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes		XXXXXXX	() () () () () () ()	()	() () () () () () ()	
<ul> <li>4. Administration</li> <li>a. Follows rules and policies</li> <li>b. Concern for health and safety of students</li> <li>c. Supervises students</li> <li>d. Follows proper channels</li> </ul>	1	XXX	() () ()	( ) ( ) ( )	() () () ()	
Additional Comments:				-	<u> </u>	
(Additional co	mments c	n the bac	<u>k)</u>			
Your services were rated as: Satisfactory	Need	s Improv	ement	() Un	satisfactor	7 ()
Signature of Coacia has how	<del> (</del>		_Date _	3/17	[062	
Signature of Evaluator Principal's Signature	YW	<u>ا</u>	_Date _	3/1/	'0b	
IF SATISFACTORY:	· · · /					
I will be available to serve next year.	Yes Th	No		3-1	7-196	
Signature / June			Date	١٠٠١	, ~ <del>v</del>	

CCIVED MAR 2 3 Mis

School ND	<u>rcen</u>						
	FF WAITERS						
Number of Year	rs of Service as: Head Coaci	3	<del></del>	Assistar	it Coach	<u> </u>	
Note: S - Satisfa	actory SI - Needs Improvemen	it U - Unsati	isfactory	NA-N	ict Appli	cable	
PERFORMANO	CE EVALUATION		S	SI	U	NA	
<ul><li>b. Has abil</li><li>c. Enthusia</li><li>d. Has self</li></ul>	owledge of the sport lity to teach knowledge asm F-control and poise /Discipline of athletes		からからか	() () () ()	() () () ()	() () () ()	
<ul><li>b. Care an</li><li>c. Demons</li></ul>	on anned practices d inventory of equipment strates punctuality keeping and reports		() (A)	()	()	() () () ( <del>)</del>	
a Rappor b. Rappor c. Rappor d. Rappor e. Rappor f. Rappor g. Rappor	elationships t with athletes t with his/her staff t with other sport coaches t with officials t with parents of athletes t with Sports Boosters t with Administration t with media codel to athletes		もこのももももものも	() () () () () () ()	() () () () () ()		
b. Concer c. Superv	s rules and policies n for health and safety of stude: ises students s proper channels	nts	434A	() () () ()	()	()	
	(Additional	comments o	n the bac	<b>*</b> )			
Your services w	vere rated as: Satisfactory		_		() U	nsatisfactor	у ()
Signature of Co		<u> </u>		_Date _		3-06	
Signature of Ev	aluator	•		_Date _			
IF SATISFAC	Principal's Signatur	e					
•	ole to serve next year.	Yes (1)	Йо	()	_	//	
Signature	JAN WALLE			Date	02/	23/06	

Sch	1001 Warrens High	_Sport	Wre	stlin	5		
Nan	* Glenn Baldensperser	_ Season _	<i>L</i>	Ji~te	T 00	9	
Nur	nber of Years of Service as: Head Coach	*	-	Assistar	nt Coach	l	
Not	e: S - Satisfactory SI - Needs Improvement	U - Unsat	isfactory	NA-N	lot Appli	cable	
PEI	REFORMANCE EVALUATION		S	SI	U	NA	
1.	Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Enthusiasm  d. Has self-control and poise  e. Control/Discipline of athletes		XXXXX	() () () ()	() () () ()	() () () ()	
2.	Organization  a. Well planned practices  b. Care and inventory of equipment  c. Demonstrates punctuality  d. Record keeping and reports		XXXX	() () ()	()	() () ()	
3.	Personal Relationships a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes		XXXXXXXXX	() () () () () () ()	() () () () () ()	() () () () () ()	
4.	Administration  a Follows rules and policies  b. Concern for health and safety of students  c. Supervises students  d. Follows proper channels  ditional Comments:	,	XXXX	()	() () ()	() () () ()	
_	(Additional c	omments (	on the had	~ <b>ት</b> )	·		
Sig Sig	mature of Coach Principal's Signature SATISFACTORY:  Till be available to serve next year.	.*	ds Improv		() U 3/1 3/1	Insatisfactor	y ()
Sig	mature // /			Date		1	<u> </u>

School Warran	_Sport _	Wre	5+112	<u> </u>		<del></del>
School Warran  Name ERic Rose guist	_ Season .	20	<u> 105-i</u>	2006		
Number of Years of Service as: Head Coach			Assistan	t Coach		
Note: S - Satisfactory SI - Needs Improvement	U - Unsat	tisfactory	NA - N	ot Appli	cable	
PERFORMANCE EVALUATION		S	SI	U	NA	
<ol> <li>Instruction</li> <li>Has knowledge of the sport</li> <li>Has ability to teach knowledge</li> <li>Enthusiasm</li> <li>Has self-control and poise</li> <li>Control/Discipline of athletes</li> </ol>		& & & & &	() () () ()	()	~() () () ()	
<ul> <li>2. Organization</li> <li>a. Well planned practices</li> <li>b. Care and inventory of equipment</li> <li>c. Demonstrates punctuality</li> <li>d. Record keeping and reports</li> </ul>		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	() () ()	()	() () ()	
3. Personal Relationships a Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes		88888888	() () () () () () ()	() () () () () () ()	() () () () () () ()	
<ul> <li>4. Administration</li> <li>a. Follows rules and policies</li> <li>b. Concern for health and safety of studen</li> <li>c. Supervises students</li> <li>d. Follows proper channels</li> </ul>	<b>ts</b>	(X) (X) (X)	() () ()	() () ()	() () ()	
Additional Comments:	***				<u> </u>	
(Additional	comments	on the ba	ck)			
Your services were rated as: Satisfactory	(X) Nee	ds Im <del>pr</del> o	vement	() U	Insatisfactor	y ()
Signature of Coach			Date _		36 21	<del></del>
Signature of Evaluator Principal's Signature  IF SATISFACTORY:			Date_	20	28-06	<u>,</u>
I will be available to serve next year. Signature	Yes A	-	o () Date	3-	10-0E	7

# WARREN COUNTY SCHOOL DISTRICT RECEIVED MAR 2 3 2006

School_	Warren	Sport W	res fli	7	<u> </u>	-
Name S	Warren Store Sillians	_Season	2005-2	2006		
Number	of Years of Service as: Head Coach		Assist	int Coach	·	<del></del>
Note: S	- Satisfactory SI - Needs Improvement	U - Unsatisfact	tory NA-	Not Appli	cable	· 
PERFO	RMANCE EVALUATION	S	SI	U	NA	
a b. c. d.	ruction  Has knowledge of the sport  Has ability to teach knowledge  Enthusiasm  Has self-control and poise  Centrol/Discipline of athletes	(X) (X) (X) (X)	()	() () ()	() () () ()	
a b. c	anization  Well planned practices  Care and inventory of equipment  Demonstrates punctuality  Record keeping and reports	(X) (X) (X)	()	()	()	
ab.cdefsh	Rapport with athletes Rapport with his/her staff Rapport with his/her staff Rapport with other sport coaches Rapport with officials Rapport with parents of athletes Rapport with Sports Boosters Rapport with Administration Rapport with media Role model to athletes	(X) (X) (X) (X) (X) (X)		()	() () () () () ()	
a. b. c.	ninistration Follows rules and policies Concern for health and safety of students Supervises students Follows proper channels	(X) (X) (X)	) ()	()	() () ()	
Addition	nal Comments:					<del> </del>
	(Additional ex	mments on the	back)			<b></b>
Signatur	rvices were rated as: Satisfactory (x) re of Coach		rovement	() Ui 3-/ 2-み	nsatisfactor 15-06 8-06	y ()
•	Principal's Signature ISFACTORY:	· · · · · · · · · · · · · · · · · · ·				
I will be	available to serve next year.	Yes A	No ()			
Signatu	re .		Date	:		

# WARREN COUNTY SCHOOL DISTRICT RECEIVED APR - 7 2028

chool Youngsville Middle/Senior					7-8 GR
ame ED TOX	_ S⇔sou	<u> </u>	<u> </u>	00 C	, <u>()</u>
Note: S - Sarisfactory SI - Needs Improvement	U - Unsan	siacury	NA - N	ot Appli	Cicle
ERFORMANCE EVALUATION	,	S	SI	U <sub>.</sub>	NA
Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Enthusiasm  d. Has self-control and poise  c. Control/Discipline of athless  f. Other		(f) (f) (f) (f) (f)	() () () () ()	()	()
- Ottanization - a. Well planned practice b. Care and inventory of equipment c. Demonstrates punctuality d. Record keeping and reports c. Other		() ( <del>)</del> ( <del>)</del> ( <del>)</del>	(*) ( ) ( )	() () () ()	() () () ()
Principal Relationships  a. Rapport with athletes  b. Rapport with his her small  c. Rapport with officials  d. Rapport with officials  e. Rapport with parents of athletes  f. Rapport with Scores Becomes  g. Rapport with Administration  h. Rapport with media  i. Role model to athletes  j. Other		999999			() () () () () () ()
Administration  L. Follows rules and policies  b. Concern for health and safety of sundence  c. Supervises students  d. Follows proper channels  e. Other  Additional Comments:	5	(a) (b) (c) (d) (f) (f)	()()()	()	()
(Additional c	-mmens on	نائد تعظ	:)		
Your services were rated as: Satisfactory ( Signature of Coacis Shall Signature of Evaluator Shall Shall Signature of Evaluator Shall Shall Signature of Evaluator Shall	) Needs		Dare _	) Un 3/16/0	satisfactry (
	Cesignee) Yes (X)		Date _	3/16 3/16	/06 /06

COACH EVALUATION FORM

School Youngsville Middle/Senior Sport Boys BASKETBALL 7-8 GRADE

Name Scorr Fox Senson 2005-2004

Note: S - Sansingtony SI - Needs Immovement U - Unsansingtony MA - Not Applicable

a. Has knowledge of the sport b. Has ability to tench knowledge c. Enthusiasm d. Has self-counted and poise e. Control/Discipline of athletes f. Other  Othe	<u> </u>	REORMANCE EVALUATION	S	SI	U.	NA
a. Well planned practices	•	a. Has knowledge of the sport b. Has ability to tench knowledge c. Earthusiasm d. Has self-control and poise e. Control/Discipline of athleses	けけけ	()	()	()
a. Rapport with athleres b. Rapport with higher staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athleres f. Rapport with Sports Boosters g. Rapport with Administration d. Rapport with media i. Role model to athleres j. Other  4. Administration a. Follows rules and policies b. Concern for health and safery of students c. Supervises students () (		a. Well planned practice b. Circ and inventory of equipment c. Demonstrates punctuality d. Record beging and reports	(/)	()	()	() () (),
a. Follows rules and policies () () () () b. Concern for health and safety of students () () () () c. Supervises students () () () ()		a. Rapport with titulers:  b. Rapport with his/her staff  c. Rapport with other sport craches  d. Rapport with officials  e. Rapport with parents of athless  f. Rapport with Sports Boosters  g. Rapport with Administration  h. Rapport with media  i. Role model to athless:	いいかのひかか	()		() () () () ()
d. Follows proper channels (/) ( ) ( ) ( ) e. Other ( ) ( ) ( ) ( )	ব.	Follows rules and policies     Concern for health and safery of students     Supervises students     Follows proper channels	() ()	()	()	()
	Sī	ignature of Coacia Suffer (Principal or Design	·		3/16/6	6 -
Your services were miled as: Satisfactory () Needs Improve	Si	ignanure of Evaluator Solomo (Principal of Design	Ю и	ā	Date	

## WARREN COUNTY SCHOOL DISTRICT

School Youngsville Middle/Senior	Sport Boys	BAS	KETBA L.C	è	
	_Sesson_ <u>000</u> S				
Note: S - Satisfactory SI - Needs Improvement				iole Tole	<del></del>
PERFORMANCE EVALUATION	S	SI	Ū.	NA	
1. Instruction					
a. Has knowledge of the sport b. Has ability to teach knowledge c. Eathusiasan d. Has self-control and poise c. Control/Discipline of athleses		()	()	() () () ()	
£ Other	(7	$\ddot{}$	()	()	•
2 Organization  a. Well planned practices  b. Care and inventory of equipment  c. Demonstrates punctuality  d. Record keeping and reports  c. Other	33322	()	( )	() () () ()	
3. Paranal Relationshira			•		
a. Rapport with athlers b. Rapport with his/her staff c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athlers f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athlers j. Other	BALLESTEE			() () () () () () () ()	
4. Administration					
<ul> <li>a. Follows rules and policies</li> <li>b. Concern for health and sufery of surdence</li> <li>c. Supervises surdence</li> <li>d. Follows proper channels</li> <li>e. Other</li> </ul>	2111CF	() () () ()	() () () ()	()	
Additional Comments:					
(Additional o	comments on the bac	1	·····		
Yangan	Meeds Improve		() Um	ಶ್ರಭಾರದ	( )
Signature of Conci Franchis		_Date ,	3/14/6	/ 76 +	
Signature of Evaluator For Municipal or	Designer)		3/14/	06	
IF SATISFACTORY: I will be available to seve near year.	Yes X No	( )	/	,	
Signange Say	*	_ Dan	3/16	106	

## COACE EVALUATION FORM

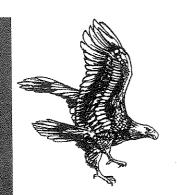
RECEIVED APR - 7 2000

School Youngsville Middle/Senior Spor	: Giris	BA	SKE7BI	; ALC	
Name RAY NEIDRICK Season	nα. <u>- 9</u> 000	5 · 20	06	, (2)	
Note: S - Sadsfactory SI - Needs Improvement U - Ur				citle	
PERFORMANCE EVALUATION	S	SI	ָּט	NA	
1. Instruction 2. Has knowledge of the sport 3. Has knowledge of the sport 4. Has ability to teach knowledge 5. Eathusiasm 6. Has self-control and poise 6. Control/Discipline of athless 6. Other  2. Other		() () () () ()		( ) ( ) ( ) ( )	
Weil planned practices     Circ and inventory or equipment     Demonstrates punctuality     Record keeping and reports     Other	() \$ 8 8 8 X	()	() () () ()	( ) ( ) ( ) ( )	
a. Rapport with aithlesses b. Rapport with his/her stard c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of aithlesses i. Rapport with Sports Boosters g. Rapport with Administration b. Rapport with media i. Role model to athlesses j. Other	CZZZZZZZĘĘZ	() () () () () () ()	() () () () () ()	() () () () () () ()	
4. Administration  1. Follows rules and policies  2. Concern for health and safery of students  3. Supervises students  4. Follows proper channels  5. Other	C 3 3 8 8 8	() () () ()	() () () ()	()	
Additional Comments:					
Your services were rated as: Satisfactory (X) N			/ \	nez ri eri	, 1
Tigname of Coaci Jag Hewhil			*	2-96	
Signature of Evaluator 2 (Principal or Design	Mr.			8-06	
IF SATISFACTORY:		() Date	3-13	≥-06	

# WARREN COUNTY SCHOOL DISTRICT Watter, Permsylvania

COACH EVALUATION FORM RECEIVED APR - 7 2006

Hame Horry WeisINGER					,0	
Yota: S - Sarisfactory SI - Needs Improvement 1	J - Unsar	istecti	MA - N	lot Appli	acle	
PERFORMANCE EVALUATION		s	SI	Ū.	NA	
Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Eathusiasm  d. Has self-control and poise  c. Control/Discipline of athless  f. Other	٠.	ナナナナナナ	() () () ()	() () () ()	()	
a. Well planned practice  b. Care and inventory of equipment  c. Demonstrates punctuality  d. Recard beging and report  c. Other		けけけい	() () () ()	() () () ()	() () () ()	-
Emonal Relationships  a. Rapport with tisher staff  c. Rapport with other sport cracked  d. Rapport with officials  e. Rapport with parents of athless  f. Rapport with Sports Boosters  g. Rapport with Administration  h. Rapport with media  i. Role model to athless  j. Other		ナナナナナナナナナ	() () () () () () ()	() () () () () ()	() () () () () () ()	
Administration  L. Follows rules and policies  b. Concern for health and safery of suidents  c. Supervises suidents  d. Follows proper channels  c. Other  Additional Comments:		<b>ナナナナ</b>	() () () ()	() () () ()	()	
(Additional con			•			
Your services were must as: Satisfactory () Signature of Coach	Need	s Improve		) Ur	sisisco	γ (
Signature of Evaluator Lang L			_Dare Dare	7 April	8006	
(Principal or Do  IF SATISFACTORY:  I will be available to serve near year.  Y		Ма	_			
Signature	~ ()	DFI	₹ J			



#### YOUNGSVILLE HIGH SCHOOL

WARREN COUNTY SCHOOL DISTRICT

227 College Street Youngsville, Pennsylvania 16371-1198 Phone: 814/563-7573 FAX: 814/563-4459

Committed to Excellence

Dr. DARRELL L. JASKOLKA
PRINCIPAL

KEN FITZSIMMONS
ASSISTANT PRINCIPAL

ANTHONY J. FERA ATHLETIC DIRECTOR

The 2005-2006 winter cheerleading squad, under the supervision of Holly Weisinger , generated fan support and school spirit the entire season. The girl's were instrumental in the winter sports pep assembly and had a variety of well planned activities. Students safety was always a priority for Holly and we appreciate her efforts in working with our cheerleading athletes his school year.

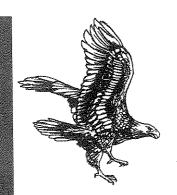
COACE EVALUATION FORM RECEIVED APR - 7 2000

School Youngsville Middle/Senior	Sport	WRES	TUN Ó		*
Name BRUCE Cummines	Season-	200	) <u> </u>	) o (	. S
Note: S - Satisfactory SI - Needs Improvement					icacie
PERFORMANCE EVALUATION	,	S	នា	Ū	NA
I. Instruction  a. Has knowledge of the sport  b. Has ability to teach knowledge  c. Eathusiasm  d. Has self-control and poise  e. Control/Discipline of athlese  f. Other		833333	() () () () ()	() () () () ()	() () () () ()
2 Organization  a. Well planned practice  b. Care and inventory of equipment  c. Demonstrates punctuality  d. Record keeping and reports  c. Other			() () ()	() () () ()	() () ()
a. Rapport with athlets b. Rapport with higher start c. Rapport with other sport coaches d. Rapport with officials e. Rapport with parents of athlets f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athlets j. Other			() () () () () () ()	() () () () () () ()	() () () () () () () ()
4. Administration 1. Follows rules and policies b. Concern for health and safety of students c. Supervises students d. Follows proper channels c. Other  Additional Comments:	· · · · · · · · · · · · · · · · · · ·		() () () ()	()()()	() () () () ()
(Additional	numers o	n the bac	\		
Your services were miled as: Satisfactory ( Signature of Coach Bure ( Signature of Evaluator Jonna ( Principal or   IF SATISFACTORY:	) Need	s Improv		() U	152015/2007 () 4-8p

# WARREN COUNTY SCHOOL DISTRICT Watter, Permsylvania

RECEIVED APR - 7 2006

School Youngsville Mid	ldle/Senior	Sport	WRES	74N6		,	
Name TONY FERA		Serson_	<u> </u>	S-30	o 6	15	
Note: S - Satisfactory SI - Need	z Improvenent	U - Unsaris	iscury	NA - N	lat Applic	? J	
PERFORMANCE EVALUATION	о́м		s	SI	Ū	NA	
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4. Administration  1. Follows rules and policie  2. Concern for health and s  3. Supervises students  4. Follows proper channels  5. Other  Additional Comments:	ज्यंदर्ग वर्षे उच्चवेद्यद		£3£30	()	() () () ()	() () () () ()	
Your services were must as:	(Additional Co	and the same of th					
Signature of Coach Tony	Then	, a ( )			•	2006	
Signature of Evaluator	Pincipai de l	Section = 1			4-6		
IF SATISFACTORY: I will be available to serve nearly Signature Jan Ren		रिंध ()	No	-	د Aoo.	L 200 b	
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Dr. DARRELL L. JASKOLKA
PRINCIPAL

KEN FITZSIMMONS ASSISTANT PRINCIPAL

ANTHONY J. FERA
ATHLETIC DIRECTOR

The 2005-2006 wrestling program, under the leadership of Mr. Fera, completed the season with a record of 10-6 and two wrestlers placed 3th and 6<sup>th</sup> in the state tournament. To say Mr. Fera is an outstanding coach would be an understatement. He is a professional who not only coaches, but mentors his athletes and shows them the relationship between athletics and real life. His knowledge of the sport is without peer and his ability to convey this knowledge is what has made Youngsville High School wrestling so successful. Year after year, he has taken all levels of talent and pushed them to accomplish things they never believed they could do. Mr. Fera enjoys working with all student athletes be it an at-risk student or a natural athlete.

The retirement of Mr. Fera after the conclusion of the 2005-2006 season will be a tremendous loss to our program and our athletes. His student centered approach has made many of his athletes into productive members of our society. His coaching will be replaced, but his mentorship of young people will be a very hard act to follow. Thank you Mr. Fera for all you have done.

COACH EVALUATION FORM RECEIVED AIR - 7 2006

School Youngsville Middle/Senior	Sport Wizes	YUN	Ça	,	
Name Scott Honordomus					···
Note: S - Satisfactory SI - Needs Improvement				ercie	
PERFORMANCE EVALUATION	S	SI	U	NA	•
1. Instruction 2. Has knowledge of the sport 3. Has knowledge of the sport 4. Has ability to teach knowledge 5. Earthusiasm 6. Has self-control and poise 6. Control/Discipline of athlema 6. Other  2. Organization	333350	() () () ()		()	
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4. Administration  a. Follows rules and policies  b. Concern for health and safery of sundents  c. Supervises students  d. Follows proper channels  e. Other  Additional Comments:	30000	() () () ()	()()()	()	
(Additional c	mmens on the cae	<b>k</b> )			
Your services were rated as: Sapisfactory & Signature of Coach Soft Sum Signature of Evaluator Jam Services	) Needs Improv		( ) U		ry ()
IF SATISFACTORY: I will be available to serve next year. Signature Signature	Cesignes) Yes <del>(A</del> No	( )			

# WARREN COUNTY SCHOOL DISTRICT Watter, Permsylvania

## COACH EVALUATION FORM

RECEIVED APR - 7 2008

School Youngsville Middle/Senior	Sport WRE	ST (, 1 1 <u>~</u>	<u>.</u>	;	
Name Jim Hoffnen	eson <u>200</u>	<u> </u>	00-1	,i)	
Note: S - Satisfactory SI - Needs Improvement U	- Unsarisfactory	NA -	Yot Appli	Cirle	
PERFORMANCE EVALUATION	S	SI	Ū <sub>.</sub>	NA	•
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4. Administration  a. Follows rules and policies  b. Concern for health and safety of suidents  c. Supervises students  d. Follows proper channels  e. Other  Additional Comments:		() () () ()		()	
Your services were rated as: Satisfactory (1) Signature of Coach Coach Signature of Evaluator Signature		CIEU		satisface	····-
(Principal or De IF SATISFACTORY: I will be available to serve new year. Y. Signanure	es (/) No				

# WARREN COUNTY SCHOOL DISTRICT Watters, Permsylvania

School Youngsville Middle/Senior	Sport Wass	<u> </u>		,	
Name CHENY SCOTT					-
Note: S - Satisfactory SI - Needs Improvement				ibie .	-
PERFORMANCE EVALUATION	, S	SI	ט	NA	**
1. Instruction 2. Has knowledge of the sport 3. Has ability to teach knowledge 4. Eathusiasm 5. Has self-control and poise 6. Control/Discipline of athlese 6. Other  2. Ottornization		() () () () ()	() () () () ()	() () () () ()	
Well planned practices     Care and inventory of equipment     Demonstrates punctuality     Record Resping and reports     Other		()	() () () ()		
a. Rapport with athletes b. Rapport with his/her staff c. Rapport with other sport crackes d. Rapport with officials e. Rapport with parents of athletes f. Rapport with Sports Boosters g. Rapport with Administration h. Rapport with media i. Role model to athletes j. Other		() () () () () () ()	() () () () () () ()	() () () () () () () ()	
4. Administration 2. Follows rules and policies 3. Concern for health and sufery of students 4. Supervises students 5. Follows proper channels 6. Other  Additional Comments:	38800	() () () ()	()	() () () ()	
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Vanaga	) Needs Improve	ment Date _	() Un	4	) _
IF SATISFACTORY: I will be available to sent new year. Signature Change of the first state of the sent new year.	Yes () No	•			_