



# Gymnastics Foundations Workbook Completion Form

***This form will be completed by your supervisor when they evaluate your completed workbook.***

Coach's Name: \_\_\_\_\_

NCCP #:	Email:
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Club Name: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

The workbook tasks are reviewed and categorized from *Insufficient to Excellent*. Coaches are encouraged to use the ratings and the comments provided as feedback on the strengths and weaknesses of their coaching.

**Excellent** - The coach completed the task in an outstanding way; exceptional.

**Good** - The coach completed the task successfully.

**Fair** - The coach completed the task but is missing some elements.

**Insufficient** - The coach attempted to complete the task but requires significant improvement to be successful, or the coach did not complete the task.

TASK	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	Comments:
TASK 1	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	
TASK 2	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	
TASK 3	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	
TASK 4	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	
TASK 5	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	
TASK 6	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	
TASK 7	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	
TASK 8	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	
TASK 9	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	
TASK 10	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Insufficient <input type="checkbox"/>	

**Additional Comments and Action Plan:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Supervisor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Coach's signature: \_\_\_\_\_ Date: \_\_\_\_\_

***To receive your PD points, please submit this completed form to your Provincial Gymnastics Federation***