

Applicant's Name (First Last): _____

Atlanta Area Association of Independent Schools (AAAIS)
Confidential Extracurricular - Athletics Evaluation Form
Rising 6th through 12th Grades

Parent/Legal Guardian: Please fill out this section and deliver this form to your child's extracurricular instructor. Include an addressed and stamped envelope to the school(s) where you wish this evaluation to be sent. The evaluator will mail these forms directly to the Admissions Office.

Applicant's Name: _____ **Preferred Name:** _____
(First) (Middle) (Last)

Date of Birth: _____ **Applying for Grade:** _____

Applicant's Current School: _____

To Parent/Legal Guardian: By submitting this evaluation form and in consideration of having this evaluation and your application considered by the member of the Atlanta Area Association of Independent Schools (AAAIS), you hereby release said member, its employees and representatives, the evaluator and the evaluator's employer from any and all claims and liability that may arise from the providing, obtaining or using the form and the substance of the information provided by the evaluator. All information provided on the attached evaluation form will be held in strictest confidence and will not be shared with students, parents, or guardians. This will remain confidential and not become part of the student's permanent academic record.

Signature of Parent or Legal Guardian

Date

Evaluator: Your candid appraisal of this child will be of invaluable assistance in giving us a complete and fair evaluation of this applicant. The purpose of this evaluation is to give additional information about an applicant's extracurricular activities, including his/her abilities. Please tell us about the applicant's participation in and contribution to your team or activity. Information about how the applicant interacts with his/her peers and adults is helpful. We appreciate your cooperation; your evaluation will be held in strict confidence.

Your name: _____ **Email address:** _____

How long have you been coaching? _____ years **Phone number:** _____

How long have you been coaching this applicant? _____ years In what sports have you coached this applicant? _____

In what capacity? Private Instructor Organization Name of league/organization: _____

Please check the appropriate box in each category that best describes this applicant:

ATHLETIC ATTITUDE	SUPERIOR	ABOVE AVERAGE	AVERAGE	ENJOYS PARTICIPATING	N/A
Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hustle/Effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ATHLETIC ATTRIBUTES	SUPERIOR	ABOVE AVERAGE	AVERAGE	ENJOYS PARTICIPATING	N/A
Physical Fitness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Endurance/Speed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skill Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Muscle Conditioning Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ATHLETIC APPROACH	SUPERIOR	ABOVE AVERAGE	AVERAGE	ENJOYS PARTICIPATING	N/A
Knowledge of Sport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows Direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Desire to Improve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential to Improve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Longevity of Commitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If there are any relevant times or statistics for this athlete, please share them here: _____

