

## JAX Parent/Swimmer Survey

Please assist your child in completing the following confidential survey for EACH person that coaches your child. Information obtained from this survey will give us valuable feedback to help make our swim team even better. Thank you for your input!

**Coach Name:** \_\_\_\_\_ **Swim Group:** \_\_\_\_\_

Name (optional and will be kept confidential): \_\_\_\_\_

**Please rate the following using a 5 point scale (circle one):**

**1- Strongly Disagree, 2-Somewhat Disagree, 3-Neutral, 4- Somewhat Agree, 5- Strongly Agree, n/a – no answer/not applicable.**

My coach is knowledgeable about swim technique.    1   2   3   4   5   n/a

My coach is enthusiastic.    1   2   3   4   5   n/a

My swim coach communicates well.    1   2   3   4   5   n/a

My coach helps me attain my swim goals.    1   2   3   4   5   n/a

My coach gives me feedback and gives me suggestions for improvement.    1   2   3   4   5   n/a

My coach respects me as an athlete.    1   2   3   4   5   n/a

My coach treats everyone equally.    1   2   3   4   5   n/a

My group size is conducive to learning.    1   2   3   4   5   n/a

My coach is on time and ready to coach at the start of each practice.    1   2   3   4   5   n/a

I am/feel part of the team.    1   2   3   4   5   n/a

I would recommend JAX to a friend.    1   2   3   4   5   n/a

My coach's strengths: \_\_\_\_\_

Weakness/suggestion for improvement: \_\_\_\_\_

What do you like best about JAX? \_\_\_\_\_

How can we improve as a team? \_\_\_\_\_

Additional comments: