

Claremont Sports Institute for Excellence

Coach Checklist (Golf)

Please provide your reference with a copy of this form. Explain that they may fax, email or mail it directly to Claremont. **This form does not need to be returned to the applicant for submission.**

Athlete Name _____ Sport: Golf

Current Club: _____

Level: Regional/Club Provincial National

Name of Coach: _____ Team/Club: _____

Phone number: _____ Email: _____

Athlete Qualities

(Please rank athlete on a scale of 1 – 5 with 5 being the highest score)

	1	2	3	4	5
Skill Development					
Strategy/Positional Knowledge					
Fitness Level					
Work Ethic					
Social Responsibility					
Willingness to learn					
Fairplay					
Leadership					

General Comments

Please submit this checklist via mail, fax or email to: ATTENTION: Shon Ryan, CSI Golf Program Coordinator at:

Claremont Secondary School
4980 Wesley Road, Victoria, B.C. V8Y 1Y9
Phone: 250-658-5221 Fax: 250-658-5387
sryan@saanichschools.ca

Application Deadline: March 6, 2019