

# THE ULTIMATE MULTISPORT COACHING CLINICS



# MULTISPORT COACHING PERSONAL PROFILE

Name: ..... Date: .....

I have outlined below the areas where you are performing well and also noted some areas where you will improve with more practice.

INDIVIDUAL SKILLS							
	EXCELLENT	GOOD	WILL IMPROVE WITH PRACTICE		EXCELLENT	GOOD	WILL IMPROVE WITH PRACTICE
<b>FOOTBALL (SOCCER)</b>							
<input type="checkbox"/> Dribbles with control				<input type="checkbox"/> Kicking - right foot			
<input type="checkbox"/> Passes with confidence				<input type="checkbox"/> Kicking - left foot			
<input type="checkbox"/> Displays confidence against a defender				<input type="checkbox"/> Moves and passes into space			
<b>CRICKET BATTING</b>				<b>BOWLING</b>			
<input type="checkbox"/> Relaxed, comfortable and balanced				<input type="checkbox"/> Builds up pace in run-up			
<input type="checkbox"/> Watches ball closely				<input type="checkbox"/> Strong front arm			
<input type="checkbox"/> Moves towards the ball				<input type="checkbox"/> Bowling arm high on release			
<input type="checkbox"/> Strikes ball confidently				<input type="checkbox"/> Follow through towards batsman			
<b>TOUCH</b>							
<input type="checkbox"/> Receives passes competently				<input type="checkbox"/> Defends with confidence			
<input type="checkbox"/> Passes ball laterally while moving forward into space				<input type="checkbox"/> Runs confidently in possession			
<b>SOFTBALL</b>							
<input type="checkbox"/> Side arm throwing action				<input type="checkbox"/> Watches ball into glove			
<input type="checkbox"/> Moves to ball with confidence				<input type="checkbox"/> Balanced/flat swing/head down on contact with ball			

General comments: .....

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Coach's name: ..... Coach's signature: .....