

Whistler Adaptive Progress Report - Between Sport Coach & Sport Coach

Completed by:

Program:

Date of program:

| | |
|---|--|
| Athlete Name: | |
| Adaptive Needs/Disability: | |
| Safety Concerns: | |
| Adaptations to equipment or teaching method: | |
| What helped the athlete learn/progress? | |
| Rate Athlete Effort Out of 10 (10 being high) | |
| What progress was achieved by the athlete? | |
| Things to work on next year: | |
| Other notes/Comments: | |