

# COACHEE PDP & GOAL EVALUATION Template

Coachee Name and Title		Evaluation for the period:	
Supervisor Name and Title		Department:	

The evaluation below deems as a contractual agreement between yourself the Coachee and your appointed Coach to ensure support, guidance, and assistance during the mentioned evaluation period. Any failure to comply with the said agreement and or not meeting of deadlines for activities, attending agreed meeting dates will result in an analysis of performance and removal from the program. By signing and agreeing to the Coach plans below you commit to your full loyalty and understand that the coaching service is for your benefit ONLY.

## ACHIEVEMENTS, ACCOMPLISHMENTS, AND RESPONSIBILITIES *(completed by Coach)*

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## STRENGTHS/WEAKNESSES *(completed by coachEE)*

STRENGTHS	WEAKNESSES
<input type="checkbox"/> Determined	<input type="checkbox"/> Being too critical
<input type="checkbox"/> Dedicated	<input type="checkbox"/> Procrastination
<input type="checkbox"/> Versatile	<input type="checkbox"/> Impatient
<input type="checkbox"/> Creative	<input type="checkbox"/> Nervous around people
<input type="checkbox"/> Enthusiasm	<input type="checkbox"/> Aggressive debater
<input type="checkbox"/> Patience	<input type="checkbox"/> People pleaser
<input type="checkbox"/> Discipline	<input type="checkbox"/> Lack time management
<input type="checkbox"/> Motivated	<input type="checkbox"/> Indecisive
<input type="checkbox"/> Communicator	<input type="checkbox"/> Bad loser
<input type="checkbox"/> Team Player	<input type="checkbox"/> Sensitive
<input type="checkbox"/> Goal orientated	<input type="checkbox"/> Overload of responsibilities

<input type="checkbox"/> Self-Confident <input type="checkbox"/> Ability to prioritise <input type="checkbox"/> Well-organised <input type="checkbox"/> Assuming responsibility <input type="checkbox"/> Cope with failure <input type="checkbox"/> Sound decision maker <input type="checkbox"/> Supportive <input type="checkbox"/> Reliable <input type="checkbox"/> Observant	<input type="checkbox"/> Resistance to change <input type="checkbox"/> Over idealistic <input type="checkbox"/> Too selfless
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### AREAS FOR DEVELOPMENT (completed by coach)

SKILL	ATTITUDE	KNOWLEDGE
<input type="checkbox"/> Workplace Activities	<input type="checkbox"/> Emotional Intelligence	<input type="checkbox"/> Finance
<input type="checkbox"/> Interpersonal Relations	<input type="checkbox"/> Conflict Handling	<input type="checkbox"/> How to solve problems?
<input type="checkbox"/> Networking	<input type="checkbox"/> Time Management	<input type="checkbox"/> How to think critically?
<input type="checkbox"/> Administration	<input type="checkbox"/> Assertion	<input type="checkbox"/> How to organize?
<input type="checkbox"/> Management		<input type="checkbox"/> How to delegate?
<input type="checkbox"/> Control		<input type="checkbox"/> Understand administration principles
<input type="checkbox"/> Delegation		<input type="checkbox"/> Create a better self esteem
<input type="checkbox"/> Organising		<input type="checkbox"/> How to handle conflict?
<input type="checkbox"/> Problem Solving		<input type="checkbox"/> How to manage myself?
		<input type="checkbox"/> Filing
		<input type="checkbox"/> How to take Minutes of meetings
		<input type="checkbox"/> How to manage a team?
		<input type="checkbox"/> How to manage time?
		<input type="checkbox"/> How to be assertive?
		<input type="checkbox"/> Creating interpersonal relations
		<input type="checkbox"/> Reporting writing
		<input type="checkbox"/> Strategic Management

		<input type="checkbox"/> Human Resource Management
		<input type="checkbox"/> Oral communication
		<input type="checkbox"/> Business Writing

Indicate the area in which the coachee should be focusing on from the above: i.e., from the skills and attitude columns, there should be at least one area from knowledge that will apply.

The indicator on growth will be the necessary knowledge the learner needs to learn and enhance the attitude toward obtaining the skill to increase performance.

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#### GOALS AND OBJECTIVES DURING THIS EVALUATION PERIOD – completed by coach

- Set SMART Goals

#### Evaluation (*completed by coachee*)

- Do you agree with the above goal? ☐Yes ☐No
- Are you satisfied with the evaluation done on areas to improve? ☐Yes ☐No

If you disagree, explain, and discuss what you are not in agreeance with, with your coach.

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**CAREER DEVELOPMENT PLAN (completed by coach)**

Development Objectives Skills, Knowledge or Attitude	Activities/Training to achieve the objectives	Support/Resources needed to meet objective	Target Date for achievement	Actual Date achieved

Meetings will be held on day after target dates set for achievement of the PDP above.

**Coachee SIGNATURE/COACH signature**

Signature		Signature	
Name		Name	
Date		Date	

This section is completed during/after the coaching process and observations.

Coachee Name and Title		Evaluation for the period:	
Coach Name and Title		Department:	

**FEEDBACK ON ACHIEVEMENTS, ACCOMPLISHMENTS, AND RESPONSIBILITIES  
(COMPLETED BY COACH)**

How well did the learner respond to learning?

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Where there any changes in behavior?

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Any additional suggested learning areas to improve this evaluation?

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**Reflection on ACHIEVEMENTS, ACCOMPLISHMENTS (COMPLETED BY COACHEE)**

✓ What did you achieve during the coaching process? Explain

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✓ How will this help during your business day?

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✓ Which area/s would you still like to develop?

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This section is completed during/after the coaching process and observations.

**Evaluation (COMPLETED BY COACHEE)**

**Coach Rating – On a scale from 1 – 5 (1 being the good and 5 excellent) how well did the coach:**

Which areas could the coach improve on?

<b>RATING</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Support You					
Understand your needs					
Give efficient and effective feedback					
Express patience					

**COACH EVALUATION (COMPLETED BY COACH)**

How well did you execute the following with the coachee?

<b>RATING</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Support You					
Understand your needs					
Give efficient and effective feedback					
Express patience					

This section is completed during/after the coaching process and observations.

**Indicate your strengths and weaknesses during the process:**

STRENGTHS	WEAKNESSES
<input type="checkbox"/> Determined	<input type="checkbox"/> Being too critical
<input type="checkbox"/> Dedicated	<input type="checkbox"/> Procrastination
<input type="checkbox"/> Versatile	<input type="checkbox"/> Impatient
<input type="checkbox"/> Creative	<input type="checkbox"/> Nervous around people
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<input type="checkbox"/> Assuming responsibility	
<input type="checkbox"/> Cope with failure	
<input type="checkbox"/> Sound decision maker	
<input type="checkbox"/> Supportive	
<input type="checkbox"/> Reliable	
<input type="checkbox"/> Observant	

What would you do to improve performance?

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This section is completed during/after the coaching process and observations.

### OVERALL COACH EVALUATION (COMPLETED BY COACH)

Criteria	Coachee Score	Coach Score	Overall Score	Percentage
Supportive				
Understand Needs				
Give Efficient and Effective Feedback				
Being Patient				
Overall Percentage				

**Percentage** = Overall Score / 10 \* 100

**Overall Percentage** = SUGB/4 \* 100

**25% and less** on individual scoring constitutes improvement and growth areas further (if necessary) CAREER DEVELOPMENT PLAN (completed by coach)

Development Objectives Skills, Knowledge or Attitude	Activities/Training to achieve the objectives	Support/Resources needed to meet objective	Target Date for achievement	Actual Date achieved

### Coachee SIGNATUREsupervisor signature

Signature		Signature	
Name	[Employee name]	Name	[Supervisor name]
Date	Click here to enter a date.	Date	[End date]