

Individual Athlete Planning Worksheet 2023-24

Athlete Name: _____ DOB: _____ Today's Date: _____

Mom's name and job: _____

Dad's name and job: _____

The primary purpose of this form is to assist coaches in their reviews and plans for their athletes and to have an understanding of an athlete's goals. Please complete all areas of the form.

Level I last competed: _____ Level for the upcoming season: _____ Level I want to be after next season: _____

My favorite event: _____ Why it's my favorite: _____

My least favorite event: _____ Why I feel this way: _____

My favorite part of competing: _____ Why I feel this way: _____

The most difficult/challenging part(s) of competing: _____

Why I feel this way: _____

My overall competitive goal for the upcoming season:

(examples: "I would like to be top 6 in the AA at States" or "have CSC's highest score on this event _____")

Competitive* STRENGTH goals I have for the upcoming season:

1. _____
2. _____

Competitive* FLEXIBILITY goals I have for the upcoming season:

1. _____
2. _____

Competitive* MENTAL goals I have for the upcoming season:

1. _____
2. _____

*Meaning, I want to make these goals happen in competition.

Remembering that I can control my performances but not the scores judges give me, I do have the following score goals:

Girls: V _____ UB _____ BB _____ FX _____ AA _____
Boys: FX _____ PH _____ R _____ V _____ PB _____ HB _____ AA _____

Outside of CSC's planned closures/breaks, do you have any vacations or times away planned longer than one week for the next year? If so, when will that be? _____

For Level 6+ or NGA athletes: If I could travel anywhere for a competition in a future season, I would want to go to:

_____ Why? _____

Please write in up to four skills you want to learn and/or compete on each of your events:

V	1. _____ 2. _____	3. _____ 4. _____
UB/HB	1. _____ 2. _____	3. _____ 4. _____
BB/PH	1. _____ 2. _____	3. _____ 4. _____
FX	1. _____ 2. _____	3. _____ 4. _____
SR	1. _____ 2. _____	3. _____ 4. _____
PB	1. _____ 2. _____	3. _____ 4. _____

Please answer the following questions while thinking about your experiences at practices:

1. My least favorite part of training is: _____
2. My favorite part of training is: _____
3. My internal motivation is (why I do gymnastics): _____

4. My external inspiration is (what helps me be motivated): _____
5. Things I feel great about in the gym: _____
6. What worries me most at practices: _____
7. Skills or training activities I am afraid of, or easily upset me:

8. Something my coach(es) could start or stop doing that I feel will help me improve:

Other sports or activities I am seriously involved with and my schedule(s) for those:

College:

What do you want to do or be when you are a grown up? _____

How many years until you enter college? _____ Do you want to do college gymnastics? _____

What colleges would you like to attend if you could?

Fill this out to the best of your ability and return this form to your Coach. Thanks!