

Dear participant,

This anonymous survey. Please answer the questions as follows:

- Select your answer with an "X"
- \_\_\_\_\_ Fill underlined space by writing your answer
- If there is a scale, let the example below, please indicate how strongly you agree or disagree to a statement:

I strongly disagree      I disagree      I am not sure      I agree      I strongly agree

<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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If you have any questions, feel free to ask someone of the team!

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1) My personal code number is \_\_\_\_\_.

1) I am \_\_\_\_\_ years-old.

2) I am female  male .

3) I work in a (*you can choose more than one answer*)

Sportclub

School

If "school" selected please describe what kind? (e.g. primary, secondary, university) \_\_\_\_\_

NGO

Other

If "other", please describe what kind: \_\_\_\_\_

4) What is the highest level of education you have reached?

Primary School

Secondary School

Vocational School

University

Other

If "other" please describe what your level of education is below.

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5) What does **your experiences** concerning physical activity/sports look like?

I am interested in:

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My teaching/training experience (e.g. fitness coach, head coach football etc.):

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How many years experience do you have concerning physical activity/sport?

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6) **Where** do you teach physical activities/sports?

*(You can choose more than one answer, if applicable)*

In the classroom

Schoolyard

Sports field (Outdoor)

Gymnasium

Other  \_\_\_\_\_

7) I mainly work with:

Girls

Boys

Both

The ages of boys/girls I work with are (select all that apply):

6 to 10 years old

11 to 14 years old

Older than 14 years

8) Are some of the following topics related to your work? Which ones?

*(Select all that apply)*

High performance sport

Gender equality

Health

HIV/AIDS prevention

Violence Prevention

Environmental Protection

Life skills

Others

If "other" please describe the topic? \_\_\_\_\_

9) Do the children tell you about their personal problems or search advices beyond sport?

Yes

No

If yes, please describe the personal problems or topics for advice?

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10) Are you in contact with the parents of the children attended?

Never

Less than once a month

Once or more times a month

11) What are the main challenges in your daily trainings?

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12) In your opinion, are there generally special challenges when working with mixed gendered groups?

Yes       No

If yes, what are these special challenges?

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13) How strongly do you agree/disagree with the following statements?

	I strongly disagree	I disagree	I am not sure	I agree	I strongly agree
I know how to plan and lead age appropriate grassroots soccer training.	<input type="checkbox"/>				
I know how to design and lead soccer tournaments for children/youth.	<input type="checkbox"/>				
Soccer is about competition and winning.	<input type="checkbox"/>				
I know how to teach life skills through soccer.	<input type="checkbox"/>				
Soccer is an appropriate tool to develop youth's personality.	<input type="checkbox"/>				
Soccer is an appropriate tool to teach competencies, which are relevant for youth's career.	<input type="checkbox"/>				
Soccer makes formal education more attractive.	<input type="checkbox"/>				
I think boys and girls can be trained together.	<input type="checkbox"/>				
I think it is important to integrate girls and gender aspects into training sessions.	<input type="checkbox"/>				
As a coach, I am a role model for the children/youth.	<input type="checkbox"/>				
When I do not have equipment, I can improvise.	<input type="checkbox"/>				

14) State your three most important expectations towards the workshop?

1. \_\_\_\_\_

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2. \_\_\_\_\_

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3. \_\_\_\_\_

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