

COMPLETE PERFORMANCE: EVENT REVIEW

Event: _____ Date: _____

Event Goals (Tick if achieved)

1. _____

2. _____

Stage /lap times: _____/_____/_____/_____/_____/_____/_____/_____

Overall time: _____

Weather/Conditions: _____

Pre event preparation

| | Poor | | | | | Great | | | | | Comments |
|--------------|------|---|---|---|---|-------|---|---|---|---|----------|
| | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 | |
| Physical | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Nutrition | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Psych skills | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Equipment | 1 | 2 | 3 | 4 | 5 | | | | | | |

The event

| | Poor | | | | | Great | | | | | Comments |
|------------------|------|---|---|---|---|-------|---|---|---|---|----------|
| | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 | |
| How I felt | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Physical | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Nutrition | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Psych skills | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Technical skills | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Tactics | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Equipment | 1 | 2 | 3 | 4 | 5 | | | | | | |

Recovery

| | Poor | | | | | Great | | | | | Comments |
|-----------|------|---|---|---|---|-------|---|---|---|---|----------|
| | 1 | 2 | 3 | 4 | 5 | 1 | 2 | 3 | 4 | 5 | |
| Physical | 1 | 2 | 3 | 4 | 5 | | | | | | |
| Nutrition | 1 | 2 | 3 | 4 | 5 | | | | | | |

What went well?

What do I need/want to improve?