



KPSAA END OF SEASON ANALYSIS FORM FOR ACTIVITIES

In order to ensure equity and Title IX compliance in all of our school district's activities, please complete this *Analysis Form* at the conclusion of each activity season.

DATE _____ ACTIVITY _____ LEVEL (C, JV, V) _____

OUTSOURCE ACTIVITY _____

	MALE	FEMALE
1. Number of Participants	_____	_____
2. Uniforms provided each athlete	_____	_____
3. Additional equipment provided each athlete	_____	_____
4. Number of home events	_____	_____
5. Number of away events	_____	_____
6. Number of scheduled trips	_____	_____
<i>~Please attach a season game schedule~</i>		
7. Days and hours of practice (weekly average)	_____	_____
8. Number of coaches assigned	_____	_____
9. Number of pep assemblies	_____	_____
10. Number of games attended by cheerleaders	_____	_____
11. Number of games attended by pep band	_____	_____

SUPPORT SERVICES: Were the following services comparable for both male and female?

	YES	NO
1. Booster clubs	_____	_____
2. Locker facilities	_____	_____
3. Practice facilities	_____	_____
4. Competitive facilities	_____	_____
5. Tutoring services (where applicable)	_____	_____
6. Media coverage	_____	_____

Signature: _____ School: _____