

2017 Fall TEAM # _____

GENDER: BOYS GIRLS

DIVISION: 10U 12U 14U 16U 19U



Coach Name: _____

*** Return BY 11/11/17 ***



PLAYER EVALUATIONS

Player Uniform Number: >>>>>>>>	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
Rating Guidelines 1 – 2 Points = Poor 3 – 4 Points = Below Average 5 – 6 Points = Average 7 – 8 Points = Above Average 9 – 10 Points = Outstanding	Player Name:															
		1. BALL CONTROL														
		2. DRIBBLING														
		3. PASSING														
		4. SHOOTING														
		5. DEFENDING/TACKLING														
		6. SPEED/AGILITY Scale of 10 (fastest) to 1 (slowest)														
		7. AGRESSIVENESS														
		8. KNOWLEDGE OF THE GAME														
		9. ATTITUDE / HEART														
TOTAL PLAYER SCORE (ADD 1 THRU 9)																
AVERAGE PLAYER SCORE (DIVIDE TOTAL BY 9)																

PLAYERS SHOULD BE EVALUATED BASED ON THE LEVEL OF PLAY BY ALL PLAYERS IN YOUR RESPECTIVE DIVISION

PRIMARY POSITION PLAYED														
GOALKEEPER RATING (1 – 10)														

PLAYER EVALUATIONS ARE CONFIDENTIAL AND SHOULD NOT BE SHARED WITH ANYONE OTHER THAN YOUR ASSITANT COACH(ES)

OVERALL PLAYER RATING ON GAME DAY (1 – 10)														
ALL STARS (COMPETATIVE) PROSPECT (Y OR N)														

Please Utilize Guidelines to Evaluate Players. Compare your team with other teams.