

Region 275 Player Evaluation Form Due: April 17<sup>th</sup>, 2010

**Coach:** \_\_\_\_\_ **Division:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Evaluation of Players on Your Team** (Scale: 1 - 5, where 1 is New to Soccer & 5 is an impact player)

	Evaluation (scale: 1-5)	Jersey #	Player Name (Last, First)		Evaluation (scale: 1-5)	Jersey #	Player Name (Last, First)
1				11			
2				12			
3				13			
4				14			
5				15			
6				16			
7				17			
8				18			
9				19			
10				20			

**Optional Player Evaluation** (Other Teams in Your Division)

Coach Name: _____				Date: _____			
	Evaluation	Jersey #	Player Name (Last, First)		Evaluation	Jersey #	Player Name (Last, First)
1				1			
2				2			
3				3			
4				4			
5				5			
Coach Name: _____				Date: _____			
	Evaluation	Jersey #	Player Name (Last, First)		Evaluation	Jersey #	Player Name (Last, First)
1				1			
2				2			
3				3			
4				4			
5				5			
Coach Name: _____				Date: _____			
	Evaluation	Jersey #	Player Name (Last, First)		Evaluation	Jersey #	Player Name (Last, First)
1				1			
2				2			
3				3			
4				4			
5				5			
Coach Name: _____				Date: _____			
	Evaluation	Jersey #	Player Name (Last, First)		Evaluation	Jersey #	Player Name (Last, First)
1				1			
2				2			
3				3			
4				4			
5				5			
Coach Name: _____				Date: _____			
	Evaluation	Jersey #	Player Name (Last, First)		Evaluation	Jersey #	Player Name (Last, First)
1				1			
2				2			
3				3			
4				4			
5				5			