Aldergrove Youth Soccer Club - AYSC

P.O. Box 582, Aldergrove, BC V4W 2V1
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www.aldergrovesoccer.com

Date: _____

Coach: _____

Current Team: _____

Age Group & Gender: _____

PLAYER ASSESSMENT FORM (to be filled out by the coach)

Evaluation - on a scale of 1 - 5 (1 being the lowest & 5 being the highest, score each player on each of the following criteria)

Player Information		Skill Assessments												Additional Comments
		1	2	3	4	5	6	7	8	9	10	11	Total	
Players First Name	Players Last Name	General ball control without pressure	Ball control under pressure	Accuracy and timing of passes	Overall game without the ball (offensively and defensively)	Overall sense of the game with the ball (looking to make play)	Overall physical dimensions (quickness, power, fitness, agility, etc.)	Overall psychological dimensions (mental toughness, leadership, etc.)	Coachability (attentiveness, attitude, etc.)	Timeliness to practices and games	Extraordinary and unique abilities	Other Points	**Total Points**	Note Other Relevant Comments Here