

Coaches Referee Game Evaluation

Game #: _____ Game Date: _____ Game Time: _____

Home Team: _____ Away Team: _____ Location: _____

Age: _____ (Male / Female)

Please Rate from 0 – 5 (5 = Highest. 3 = Satisfactory)

Pre-game

On Time	1	2	3	4	5
Checked players equip. & passes	1	2	3	4	5

Game

Center Referee

Prompt, firm decisions	1	2	3	4	5
Signals were clearly indicated	1	2	3	4	5
Consistent in decision making	1	2	3	4	5
Kept up with play	1	2	3	4	5
Foul recognition	1	2	3	4	5
Showed respect for players/coaches	1	2	3	4	5
Got the “big” decisions correct	1	2	3	4	5
Appropriate use of “advantage”	1	2	3	4	5

Assistant Referee

Recognized & interpreted offsides	1	2	3	4	5
Prompt, firm decisions & signals	1	2	3	4	5
Correct positioning	1	2	3	4	5

Comments: _____

