

WESTON SOCCER
PLAYER EVALUATION

Players Name:-

Year:-

Coach:-

Team:-

Season:- Fall

Evaluation:-

1- Very Good	2- Good	3- Fair	4- Needs improving
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Technical

Passing 1 2 3 4
Movement 1 2 3 4
Passing & Movement 1 2 3 4
Possession 1 2 3 4
Receiving The Ball 1 2 3 4

Attacking 1 2 3 4
First Touch 1 2 3 4
Heading 1 2 3 4
Defending 1 2 3 4

Comments

Tactical

Practice Play 1 2 3 4

Game Play 1 2 3 4

Comments

Player Development

Fitness 1 2 3 4
Leadership 1 2 3 4
Dedication 1 2 3 4

Understanding 1 2 3 4
Communication 1 2 3 4
Confidence 1 2 3 4

Comments

Coach Signature: _____

Date: _____

Director Signature: _____

Date: _____