**Player Evaluation Form**

**U10 divisions**

Coach Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Division: \_\_\_\_\_\_\_\_\_ Boys/Girls: \_\_\_\_\_\_\_\_\_\_\_\_ Team #\_\_\_\_\_\_\_

Rating System:

5-Exceptional (All Star caliber/could play up)

4-Above Average

3-Average

2-Below Average

1-Weak

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1st/2nd year in this division | First Name | Last Name | Ball Control / Passing | Dribbling | Kicking / Shooting | Tackling | Stamina | **Total** |
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Instructions:

Please honestly evaluate each player. They will not see their ratings and we use this information to balance our future teams.

**Ball Control/Passing –**Player can control the ball efficiently using the inside of BOTH feet, can demonstrate a proper push pass and show willingness to pass to other players

**Dribbling-**Can run with the ball under close control while looking downfield

**Kicking/Shooting-** Exhibits strength and accuracy with both feet

**Tackling-**Demonstrates the timing and various techniques needed to win the ball from an opponent safely

**Stamina-**Ability to play effectively at a sustained pace for entire game