



BCSOA REFEREE COACHING FORM

REFEREE NAME: _____ EMAIL: _____

DATE: _____ PARTNER: _____

HOME TEAM:			AWAY TEAM:		
SCORE:	CAUTIONS:	EJECTIONS:	SCORE:	CAUTIONS:	EJECTIONS:
GAME DIFFICULTY:	EASY <input type="checkbox"/>	DIFFICULT <input type="checkbox"/>	CONTENTIOUS <input type="checkbox"/>		
GENDER:	GIRLS <input type="checkbox"/>	BOYS <input type="checkbox"/>			
LEVEL:	VARSITY <input type="checkbox"/>	JV <input type="checkbox"/>	FRESHMAN <input type="checkbox"/>		
FIELD CONDITION:	GOOD <input type="checkbox"/>	FAIR <input type="checkbox"/>	POOR <input type="checkbox"/>	TURF <input type="checkbox"/>	
WEATHER:	SUN <input type="checkbox"/>	CLOUDS <input type="checkbox"/>	RAIN <input type="checkbox"/>		
		MEETS EXPECTATIONS	AREA OF FOCUS	DNO	
PROFESSIONALISM					
Appearance/Arrival					
Presence					
Pre-game issues, field insp/pre-game					
Attitude					
MECHANICS					
Appropriate position for ALL restarts					
Appropriate position during active play					
Physically fit the entire game					
Sprints when needed					
Correctly signals					
Restarts handled correctly					
Substitutions handled correctly					
GAME CONTROL FOUL RECOGNITION					
Recognizes DFK/IFK/PK					
Recognizes & Applies Advantage					
Makes Correct Offside Determinations					
MISCONDUCT					
Recognizes Misconduct					
Deals with Cautions Correctly					
Deals with Ejections Correctly					
Uses Correct Mechanics					
Deals with Coaches/Bench Personnel					
OVERALL MANAGEMENT SKILLS					
Communication Skills					
Uses options to control					
Exhibits confidence					
Use of whistle/voice					
Reading of Game					
Field Coverage (Up & In)					
Game Flow Understanding					

THREE POSITIVE OBSERVATIONS:

THREE AREAS FOR IMPROVEMENT:

COMMENTS / NOTES: