

Player Assessment Form

Player Name	Position	Date of Birth			

Player Grading Scale

1	Excellent	2	Good	3	Average	4	Weakness
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Technical ability	Right Foot Left Foot							
Short Passing	1	2	3	4	1	2	3	4
Long Passing	1	2	3	4	1	2	3	4
Shooting (outside box)	1	2	3	4	1	2	3	4
Shooting (inside the box(1	2	3	4	1	2	3	4
Control / First Touch	1	2	3	4	1	2	3	4

Heading	1	2	3	4
Close control (Dribbling)	1	2	3	4
Running with ball (Dribbling)	1	2	3	4
Defending (1 vs. 1)	1	2	3	4
Balance / Agility	1	2	3	4

Technical Ability

Understanding systems of play and individual role	1	2	3	4
Understanding systems of play and role of team mates	1	2	3	4
Positional awareness during games		2	3	4
Positional awareness of teams mates during game	1	2	3	4

Additional Comments / Assessment

Coach Signature: Date: