



District II Evaluation of Game Officials

Date _____ Home Team _____ Visiting Team _____

Location _____ Field # _____ Time _____ AM / PM

Boys: ___ Girls: ___ Age: ___ Total: Cautions ___ Ejections ___ Final Score: (H) ___ (V) ___

Filed By: _____ Team _____ Position _____

In order to improve our referees, we need your inputs. Please circle the number that you think best describes the referee's performance IN THIS GAME. It is important that you try to be objective and give your opinion independent of previous experiences.

(5 = Excellent, 4 = Good, 3 = Average, 2 = Below Average, 1 = Poor)

<u>CRITERIA</u> (circle a number)	<u>Center Referee</u>	<u>Sr. Assistant Referee</u>	<u>Assistant Referee</u>
1. Punctuality/Dress and Appearance	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
2. Fitness/Field coverage	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
3. Positioning	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
4. Mechanics & Signals	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
5. Attitude & Manner	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
6. Foul Recognition	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
7. Consistency	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
8. Game Control	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
9. Use of Advantage	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
10. Courtesy	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
11. Ability to gain respect through performance/personality	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
12. Professionalism	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5

Overall Rating

- Referee 1 2 3 4 5
- Sr. Assistant Referee (Team side) 1 2 3 4 5
- Assistant Referee 1 2 3 4 5

Please **DROP** this form after your game at the Morgan Hill Referee Trailer
Or mail (or drop) it to: Philippe Dor, 22687 Voss Avenue, Cupertino, CA 95014-2672