



Kenton Soccer Association Player Evaluation Form

Player's Name: _____
 Coaches Name: _____
 Date: _____ Age Group: _____
 Team: _____

TECHNICAL ASSESSMENT *(1-Exceptional; 5-Needs significant improvement.)*

Passing with pace and accuracy

Short range	1	2	3	4	5
Long Range	1	2	3	4	5
Non-Dominant Foot	1	2	3	4	5
Shielding	1	2	3	4	5
Heading	1	2	3	4	5
Tackling	1	2	3	4	5

Receiving under pressure

Ground balls	1	2	3	4	5
Air Balls	1	2	3	4	5

Shooting /Finishing

Accuracy	1	2	3	4	5
Power	1	2	3	4	5
Range	1	2	3	4	5

TACTICAL ASSESSMENT *(1-Exceptional; 5-Needs significant improvement.)*

1 st Attacker Decision	1	2	3	4	5
Ability to beat players	1	2	3	4	5
2 nd Attacker support	1	2	3	4	5
Combination play	1	2	3	4	5
3 rd Attacker	1	2	3	4	5
1 st Defender	1	2	3	4	5
2 nd Defender	1	2	3	4	5
3 rd Defender	1	2	3	4	5

Back to goal play	1	2	3	4	5
Timing of runs	1	2	3	4	5
Mobility	1	2	3	4	5
Vision w/o ball	1	2	3	4	5
Zonal concept	1	2	3	4	5
Quick decisions	1	2	3	4	5
Knowledge of rules	1	2	3	4	5

PHYSICAL ASSESSMENT *(1-Exceptional; 5-Needs significant improvement.)*

Speed	1	2	3	4	5
Quickness	1	2	3	4	5
Change of pace	1	2	3	4	5
Strength/Power	1	2	3	4	5

Agility	1	2	3	4	5
Endurance	1	2	3	4	5
Workrate	1	2	3	4	5
Vertical jump	1	2	3	4	5

PSYCHOLOGICAL ASSESSMENT *(1-Exceptional; 5-Needs significant improvement.)*

Composure w/ball	1	2	3	4	5
Leadership	1	2	3	4	5
Coachability	1	2	3	4	5

Training mentality	1	2	3	4	5
Match mentality	1	2	3	4	5
Deals with frustration	1	2	3	4	5

GENERAL COMMENTS