



UNITED STATES SOCCER FEDERATION REFEREE DEVELOPMENT AND GUIDANCE FORM

Referee _____ State _____ Grade _____
 Assessor _____ State _____ Grade _____
 Competition _____ Date ____/____/____
 Location _____ Time _____
 Home Team _____ Visiting Team _____

Level Of Competition U-12 U-13 U-14 U-15 U-16 U-17 U-18 U-19 Co-Rec Adult

		YES	SOME-TIMES	NO			YES	SOME-TIMES	NO
DRESS AND APPEARANCE					POSITION/MECHANICS/SIGNALS				
<ul style="list-style-type: none"> • Looked neat and well-groomed? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Appeared confident? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Were first impressions good? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 					<ul style="list-style-type: none"> • Anticipated play and adjusted position? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Kept asst. referees in view at all times? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Acknowledged signals by asst. referees? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Well-positioned for set plays? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Decisions clearly indicated by signals? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Made best use of the whistle? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 				
COMMENTS: _____					COMMENTS: _____				
PRE-GAME					ACCURACY OF DECISIONS				
<ul style="list-style-type: none"> • Arrived on time? <input type="checkbox"/> <input type="checkbox"/> • Field inspected? <input type="checkbox"/> <input type="checkbox"/> • Equipment inspected? <input type="checkbox"/> <input type="checkbox"/> • Pre-game procedures followed? <input type="checkbox"/> <input type="checkbox"/> 					<ul style="list-style-type: none"> • Recognized "intent" correctly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Rec. offside <i>position vs</i> <i>infraction</i>? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Recognized DFK vs IFK infractions? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Recognized misconduct correctly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Rec. serious foul play/violent conduct? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Avoided calling trifling offenses? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 				
COMMENTS: _____					COMMENTS: _____				
FITNESS					GAME CONTROL				
<ul style="list-style-type: none"> • Accelerated when necessary? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Recovered from deep position? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Appeared fit throughout entire game? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Kept up with play <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 					<ul style="list-style-type: none"> • Asserted authority firmly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Recognized first fouls? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Managed the wall correctly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Dealt with incidents correctly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Administered cautions and/or sendoffs in approved manner? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Dealt with persistent infringement? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Stopped encroachment immediately? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Administered substitutions correctly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Dealt with time-wasting correctly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Players accepted decisions? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Made effective use of advantage? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 				
COMMENTS: _____					COMMENTS: _____				
ATTITUDE					RECOMMENDATION				
<ul style="list-style-type: none"> • Kept cool under pressure? <input type="checkbox"/> <input type="checkbox"/> • Was mentally prepared? <input type="checkbox"/> <input type="checkbox"/> • Showed respect for players? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Appeared to enjoy? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 					<ul style="list-style-type: none"> <input type="checkbox"/> Further evaluation at this level. <input type="checkbox"/> Grade retention <input type="checkbox"/> Upgrade 				
COMMENTS: _____					(The assessor is not required to complete a recommendation)				
COURAGE/CHARACTER/CONSISTENCY									
<ul style="list-style-type: none"> • Gave decisions promptly and firmly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Got play (re-)started quickly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Dealt with injuries correctly? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Accounted for all lost time? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Was approachable? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Maintained composure? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> • Consistent in decision making? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 									
COMMENTS: _____									

ASSESSOR SIGNATURE _____ DATE: _____

DISTRIBUTION: 1) OFFICIAL 2) STATE DIRECTOR OF ASSESSMENT 3) ASSESSOR