



# United States Soccer Federation

## REPORT OF ASSESSMENT OF GAME OFFICIALS

OFFICIAL'S FULL PROPER NAME	SOCIAL SECURITY #	GRADE	STATE	Were quality and level of play a sufficient test ?
REFEREE				<input type="checkbox"/> Yes <input type="checkbox"/> No
LINE #1				<input type="checkbox"/> Yes <input type="checkbox"/> No
LINE #2				<input type="checkbox"/> Yes <input type="checkbox"/> No

ASSESSOR NAME	grade	STATE	CO	TELEPHONE
ADDRESS	CITY/ST./ZIP			

GAME DATE	LOCATION: Field/City/State	HOME TEAM	VISITING TEAM

LEVEL of PLAY	<input type="checkbox"/> Men	<input type="checkbox"/> International	<input type="checkbox"/> Top USSF National	<input type="checkbox"/> Amateur Div. 1	<input type="checkbox"/> Youth U-19
	<input type="checkbox"/> Women	<input type="checkbox"/> Professional	<input type="checkbox"/> Regional League	<input type="checkbox"/> Other Amateur	<input type="checkbox"/> Other Youth

**What was the degree of difficulty of the game ?**   
  Easy   
  Competitive   
  Very Difficult

**Was the performance of the referee acceptable ?**   
  Yes   
  No

PERFORMANCE EVALUATION					
REFEREE		ASSISTANT REFEREE #1		ASSISTANT REFEREE #2	
1 APPEARANCE	2 _____	1 APPEARANCE	2 _____	1 APPEARANCE	2 _____
2 PRE-GAME	3 _____	2 PRE-GAME	3 _____	2 PRE-GAME	3 _____
3 FITNESS	5 _____	3 FITNESS	5 _____	3 FITNESS	5 _____
4 ATTITUDE	5 _____	4 ATTITUDE	5 _____	4 ATTITUDE	5 _____
5 COURAGE, CHARACTER AND CONSISTENCY	20 _____	5 COURAGE, CHARACTER AND CONSISTENCY	25 _____	5 COURAGE, CHARACTER AND CONSISTENCY	25 _____
6 POSITIONING, MECHANICS AND SIGNALS	15 _____	6 POSITIONING/SIGNALS	15 _____	6 POSITIONING/SIGNALS	15 _____
7 ACCURACY OF DECISIONS	25 _____	7 ASSISTANCE-OFFSIDE GOAL LINE TOUCH LINE	20 _____	7 ASSISTANCE-OFFSIDE GOAL LINE TOUCH LINE	20 _____
8 CONTROL	25 _____	8 ASSISTANCE-FOULS AND MISCONDUCT	25 _____	8 ASSISTANCE-FOULS AND MISCONDUCT	25 _____
<b>TOTAL</b>	_____	<b>TOTAL</b>	_____	<b>TOTAL</b>	_____

**Assessor's recommendations as to the performance of:**

<b>REFEREE</b>	<input type="checkbox"/> Further Evaluation needed at this level of competition <input type="checkbox"/> Grade retention <input type="checkbox"/> Upgrade

<b>L #1</b>	<input type="checkbox"/> Further Evaluation needed at this level of competition <input type="checkbox"/> Grade retention <input type="checkbox"/> Upgrade

<b>L #2</b>	<input type="checkbox"/> Further Evaluation needed at this level of competition <input type="checkbox"/> Grade retention <input type="checkbox"/> Upgrade

<b>Assessor signature</b>	<b>Date</b>
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Distribution: *Original* - Assessor retain in file.    *Copy* - State Director of Referee Assessment  
 Note: If State 1, National or International Referee assessed as Referee or Linesman - *copies* to Regional Assessor Coordinator and USSF.