

# Long Island Soccer Football League Referee Evaluation:

## Coach's Evaluation of Referee's Performance

Name of Referee: \_\_\_\_\_ Coach Name: \_\_\_\_\_ ID# \_\_\_\_\_

Date of Game: \_\_\_\_\_ Game Time: \_\_\_\_\_ Location \_\_\_\_\_ End of Game \_\_\_\_\_

Home Team: \_\_\_\_\_ Division: \_\_\_\_\_

Visiting Team Name: \_\_\_\_\_ Final Score: Home \_\_\_\_ Visitors \_\_\_\_

Evaluate: \_\_\_\_\_ (Circle One)

Attitude toward Players: \_\_\_\_\_ Poor \_\_\_\_\_ Fair \_\_\_\_\_ Good \_\_\_\_\_ Excellent \_\_\_\_\_

Attitude toward Coaches: \_\_\_\_\_ Poor \_\_\_\_\_ Fair \_\_\_\_\_ Good \_\_\_\_\_ Excellent \_\_\_\_\_

Impartiality: \_\_\_\_\_ Poor \_\_\_\_\_ Fair \_\_\_\_\_ Good \_\_\_\_\_ Excellent \_\_\_\_\_

Knowledge of the Rules: \_\_\_\_\_ Poor \_\_\_\_\_ Fair \_\_\_\_\_ Good \_\_\_\_\_ Excellent \_\_\_\_\_

Field Position: \_\_\_\_\_ Poor \_\_\_\_\_ Fair \_\_\_\_\_ Good \_\_\_\_\_ Excellent \_\_\_\_\_

Game Control: \_\_\_\_\_ Poor \_\_\_\_\_ Fair \_\_\_\_\_ Good \_\_\_\_\_ Excellent \_\_\_\_\_

Did the Referee arrive in time: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Time Arrived: \_\_\_\_\_

Referee Appearance: \_\_\_\_\_ Poor \_\_\_\_\_ Fair \_\_\_\_\_ Good \_\_\_\_\_ Excellent \_\_\_\_\_

Comments: (Attach additional sheet or use back if needed.) \_\_\_\_\_

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Note: All Evaluation forms MUST be submitted each week. Timely information will help the League correct a situation. Clubs with more than one team you must fill a separate form for each team. Remember fill out form win or loose the game.



Return to Referee Evaluation Committee.  
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