



# 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

### DRESS AND APPEARANCE

- |                                 | YES                      | SOME-TIMES               | NO                       |
|---------------------------------|--------------------------|--------------------------|--------------------------|
| • 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"/> |

COMMENTS: \_\_\_\_\_

### PRE-GAME

- |                                 |                          |                          |
|---------------------------------|--------------------------|--------------------------|
| • 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"/> |

COMMENTS: \_\_\_\_\_

### FITNESS

- |  |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|
| • Accelerate when necessary?           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Recover 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"/> |

COMMENTS: \_\_\_\_\_

### ATTITUDE

- |                               |                          |                          |
|-------------------------------|--------------------------|--------------------------|
| • 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"/> |
| • Appeared to enjoy?          | <input type="checkbox"/> | <input type="checkbox"/> |

COMMENTS: \_\_\_\_\_

### COURAGE/CHARACTER/CONSISTENCY

- |                                       |                          |                          |                          |
|---------------------------------------|--------------------------|--------------------------|--------------------------|
| • 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: \_\_\_\_\_

### POSITION/MECHANICS/SIGNALS

- |   | YES                      | SOME-TIMES               | NO                       |
|---|--------------------------|--------------------------|--------------------------|
| • Anticipated play and adjusted position? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Kept linesperson in view at all times?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Acknowledged signals by linesperson?    | <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: \_\_\_\_\_

### ACCURACY OF DECISIONS

- |  |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|
| • Recognized "intent" correctly?               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| • Rec. offside <i>position vs 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: \_\_\_\_\_

### GAME CONTROL

- |   |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|
| • 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: \_\_\_\_\_

### RECOMMENDATION

- Further evaluation at this level.
- Grade retention
- Upgrade

(The assessor is not required to complete a recommendation)

ASSESSOR SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

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