

AYSO FIELD WORKSHEET

| | | | |
|-------------------|---|-------------------------------|-------------------|
| | Referee Name: _____ Date: _____ Division: _____ Game Difficulty (1st Half): _____ | | |
| Ass't Referee AR1 | Areas Handled Well | Possible Areas of Improvement | Ass't Referee AR2 |
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(Foul) Referee's position, with a line to the foul position and description
 (Ball) Referee's position, with a line to ball position where last played, for shot on goal or ball over goal-line
 (Ball) Referee's position, with a line to ball position where last played, when a goal is scored

Game Difficulty
 1-2: Easy; 3-4: Below Average; 5: Average; 6-7: Challenging; 8-9: Extremely Challenging
 (Note: Average means "A Typical AYSO Regular Season Match")

First Half

Home Team

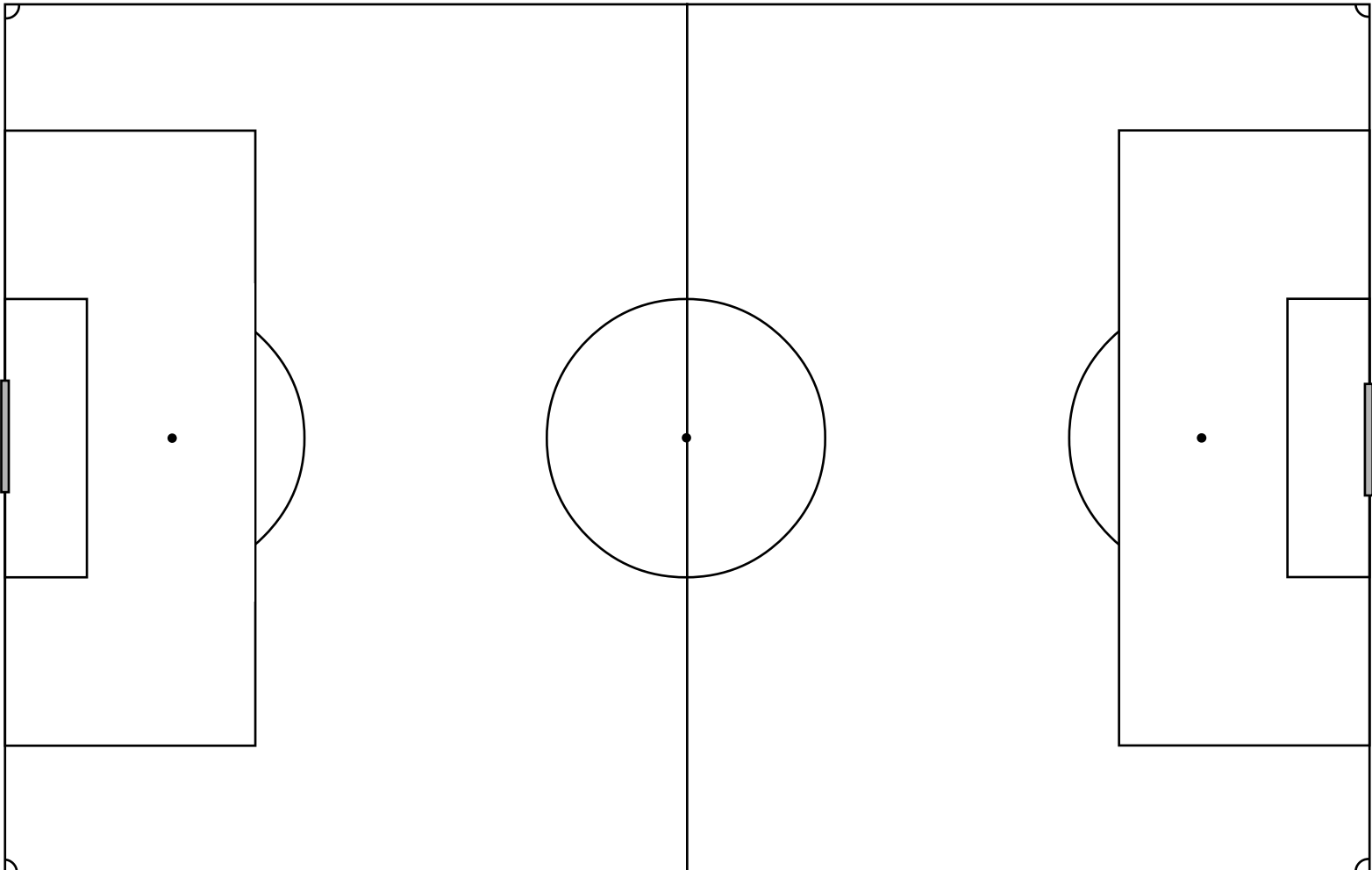
_____ Name

_____ Color

Score: (Min./No.)

Caution: (Min./No.)

Send Off: (Min./No.)



Away Team

_____ Name

_____ Color

Score: (Min./No.)

Caution: (Min./No.)

Send Off: (Min./No.)



1st Half Score: _____ Assessor's Name _____ E-Mail Address: _____



AYSO FIELD WORKSHEET

| | | | |
|-------------------|---------------------|-------------------------------|-----------------------------------|
| | Referee Name: _____ | Field: _____ | Game Difficulty (2nd Half): _____ |
| Ass't Referee AR1 | Areas Handled Well | Possible Areas of Improvement | Ass't Referee AR2 |
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_____ (Foul) Referee's position, with a line to the foul position and description
 _____ (Ball) Referee's position, with a line to ball position where last played, for shot on goal or ball over goal-line
 _____ (Ball) Referee's position, with a line to ball position where last played, when a goal is scored

Game Difficulty
 1-2: Easy; 3-4: Below Average; 5: Average; 6-7: Challenging; 8-9: Extremely Challenging
 (Note: Average means "A Typical AYSO Regular Season Match")

Second Half

Home Team

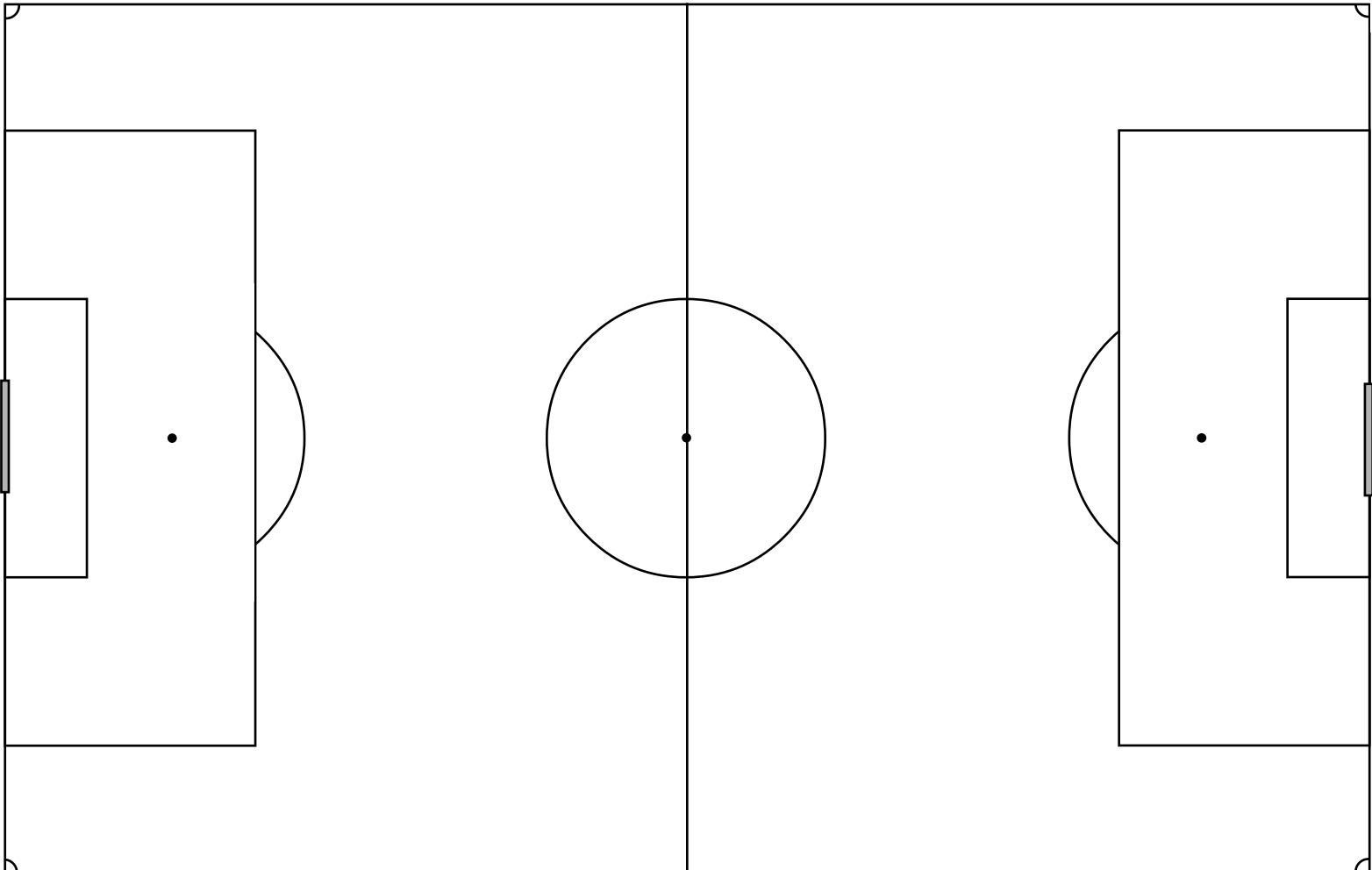
_____ Name

_____ Color

Score: (Min./No.)

Caution: (Min./No.)

Send Off: (Min./No.)



Away Team

_____ Name

_____ Color

Score: (Min./No.)

Caution: (Min./No.)

Send Off: (Min./No.)



Final Score: _____ Assessor's Signature: _____ Telephone: _____

