



# VYSA Academy Program

## Player Evaluation Form



**Please Print**

Athlete's Name \_\_\_\_\_ Club Team \_\_\_\_\_ Date \_\_\_\_\_

Coach's Name \_\_\_\_\_ Club Team Coach's Email \_\_\_\_\_

Location  Southwest  Central  West  North ( Arlington or  Prince William)

Favorite Professional Team/Player \_\_\_\_\_

### Ratings

- 1 = Needs Improvement
- 2 = Good
- 3 = Excellent

Physical	Rating by Player	Rating by Coach
Strength	_____	_____
Speed	_____	_____
Flexibility	_____	_____
Agility	_____	_____

### Comments from Academy Coaches

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Technical	Rating by Player	Rating by Coach
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Control	_____	_____
Dribbling	_____	_____
Passing	_____	_____
Short	_____	_____
Long	_____	_____
Range	_____	_____
Heading	_____	_____
Offensive	_____	_____
Defensive	_____	_____
Tackling	_____	_____
Shooting	_____	_____
Volleys	_____	_____
Non	_____	_____
Dominant Ft.	_____	_____



### Goals to Accomplish

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### Tactical

Decisions	_____	_____
Defending	_____	_____
Reading Play	_____	_____
Attacking	_____	_____
Communication	_____	_____
Winning 1V1's	_____	_____

### Mental/Psychological (Rating by Coaches Only)

Appearance	_____
Determination	_____
Pride	_____
Attitude	_____
Composure	_____
Concentration	_____
Leadership	_____
Love for the Game	_____

### Recommendations for Improvement and Achieving Your Goals

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Player's Signature \_\_\_\_\_

Coach's Signature \_\_\_\_\_