TRAVEL PLAYER
EVALUATION FORM

SYSA requires all coaches to submit the following assessment for each player on the team. This evaluation represents the coach's most important opportunity in helping to determine the most suitable placement for each player. Please be thoughtful, candid and thorough in your assessments.

Coach's Name:_____ Team: Boys' /Girls' UNDER_____

Team Name: _____

Please indicate which number best fits each player in each category:

1: Major playing weakness	**2:** Still developing this skill	**3:** Well developed skill	**4:** Major playing strength

Player	*Ranking within Team	Overall Skill	Game Sense	Attitude	Coachable	Work Ethic	Reliable

***Indicate player's ranking as: top third / middle third / bottom third**

COMPLETED FORM MUST BE RETURNED BY MARCH 5TH
RETURN TO KATRINA DOHERTY (GIRLS) OR TSAN CHESTER-BAUER (BOYS)

Your support in completing and returning this form is greatly appreciated!
Additional comments may be written on the back of this page.