

HYSL Referee Mentor Feedback Form – Referee Copy

Referee: _____ Mentor: _____

Date: _____ Time: _____ Play Level - U B/G (circle) Ref / AR (circle)

Check box: "O" (outstanding); "A" (Acceptable); "N" (needs improvement); NA (Not Applicable)	O	A	N	NA
1. Arrives on time (30 minutes before KO)				
2. Professional attire (jersey tucked in, socks up, shoes cleaned, etc)				
3. Pre-game check (goal anchored, referee pre-game planning, check in, coin toss)				
4. Attitude (enthusiasm, professionalism, willingness to learn, etc.)				
5. Accuracy of decisions (correct calls & correct non -calls, when needed)				
6. Timing (start game on time, time quarters/ halves appropriately)				
7. Positioning during game				
8. Blowing of whistle (loud enough?, changes sound to give different meanings)				
9. Arm signals / use of flag				
10. Foul Recognition				
11. Courage				

Comments: _____

Suggestions: _____

Referee: if you have questions or concerns, contact your Mentor Coordinator

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Mentor: Send this part of the Mentor Feedback Form to your Mentor Coordinator