

# SYF OFFICIAL'S EVALUATION FORM - 2010

Name: \_\_\_\_\_ Team/Level: \_\_\_\_\_ Game Date: \_\_\_\_\_

Host: \_\_\_\_\_ Score: \_\_\_\_\_ Visitor: \_\_\_\_\_ Score: \_\_\_\_\_

Please be objective but candid in providing the following information. Your comments and observations about the game officials are used to assist L2R and SYF in evaluating and training officials. Specific comments with respect to any area marked as "Unacceptable" is required. Thank you for your time and cooperation.

Please return this form to: L2R Football Group, c/o Bill Kruse  
1317 Silica Avenue, Sacramento, CA 95815  
or email to: [billkruse@sbcglobal.net](mailto:billkruse@sbcglobal.net)

**Referee** \_\_\_\_\_ Overall Performance:  Acceptable  Unacceptable  
(White Hat)

	Acceptable	Unacceptable	
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	Comments: _____ _____ _____
Hustle	<input type="checkbox"/>	<input type="checkbox"/>	
Knowledge of the Rules	<input type="checkbox"/>	<input type="checkbox"/>	
Game Control	<input type="checkbox"/>	<input type="checkbox"/>	
Communication	<input type="checkbox"/>	<input type="checkbox"/>	

**Umpire** \_\_\_\_\_ Overall Performance:  Acceptable  Unacceptable

	Acceptable	Unacceptable	
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	Comments: _____ _____ _____
Hustle	<input type="checkbox"/>	<input type="checkbox"/>	
Knowledge of the Rules	<input type="checkbox"/>	<input type="checkbox"/>	
Game Control	<input type="checkbox"/>	<input type="checkbox"/>	
Communication	<input type="checkbox"/>	<input type="checkbox"/>	

**Linesman(Chains)** \_\_\_\_\_ Overall Performance:  Acceptable  Unacceptable

	Acceptable	Unacceptable	
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	Comments: _____ _____ _____
Hustle	<input type="checkbox"/>	<input type="checkbox"/>	
Knowledge of the Rules	<input type="checkbox"/>	<input type="checkbox"/>	
Game Control	<input type="checkbox"/>	<input type="checkbox"/>	
Communication	<input type="checkbox"/>	<input type="checkbox"/>	

**Line Judge** \_\_\_\_\_ Overall Performance:  Acceptable  Unacceptable

	Acceptable	Unacceptable	
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	Comments: _____ _____ _____
Hustle	<input type="checkbox"/>	<input type="checkbox"/>	
Knowledge of the Rules	<input type="checkbox"/>	<input type="checkbox"/>	
Game Control	<input type="checkbox"/>	<input type="checkbox"/>	
Communication	<input type="checkbox"/>	<input type="checkbox"/>	