



AYSO Assistant Referee Assessment Check-List

Date: _____
 Candidate: _____
 Address: _____
 E-Mail: _____
 Phone: _____
 S/A/R: _____ / _____ / _____
 Field: _____

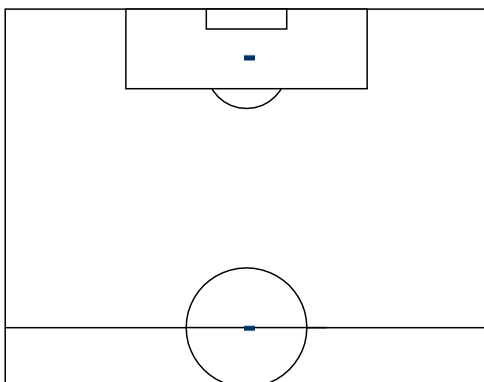
Time: _____
 Assessor: _____
 Phone: _____
 E-Mail: _____
 Division: _____
 Home Team: _____
 Away Team: _____

Assessment for Upgrade to Level

Advanced

National

	Acceptable	Not Acceptable	Not Observed		Acceptable	Not Acceptable	Not Observed
1. DRESS AND APPEARANCE							
a. Correct Uniform	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b. Appropriate Badge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
2. PRE_GAME							
<i>Organization</i>							
Arrival at proper time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Instructions to Assistant Referees							
Asks for clarification of items missed in referee's instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
3. FITNESS							
a. Keeps up with play	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b. Capable of sprinting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
c. Adequate side-stepping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
4. ATTITUDE							
a. Shows respect for fellow officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b. Shows respect for players, coaches and others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
c. Shows confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
5. COURAGE, CHARACTER, CONSISTENCY							
a. Maintains composure and concentration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b. Unaffected by appeals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
c. Approachable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
6. POSITIONING, MECHANICS, SIGNALS							
Set Plays							
a. Kick-off positioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b. Goal kick positioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
c. Corner kick positioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
d. Throw-in positioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
e. Penalty kick positioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
f. Free kick positioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Dynamic Play							
a. During attacks stays with offside line	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b. Follows ball to goal line	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
c. Offside: ensures player's participation before signaling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Diagonal System of Control							
Assistant referee knows the mechanics of the diagonal System of Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Coordination and Cooperation							
a. Follows referee's instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b. Eye contact between officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
c. Officials enter and exit the field as a team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Signals							
a. Uses approved signals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b. Uses clear signals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
c. Signals as instructed by referee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
d. Mirrors signals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				



Comments

SCORE: First Half _____ Second Half: _____

GAME DIFFICULTY (circle one)

Easy Below Average Average Challenging Extremely Challenging
 (Note: Average means "A Typical AYSO Regular Season Match")

- Recommended for upgrade
- Recommended for further observation

 Signature of Assessor