



# Assistant Referee Feedback Form

Name \_\_\_\_\_ Date/Time \_\_\_\_\_

Home Team \_\_\_\_\_ Away Team \_\_\_\_\_

Competition/Grade \_\_\_\_\_ Venue \_\_\_\_\_

Degree of Difficulty

- Low  
 Medium  
 High

KPI 1 Was offside interpreted correctly?.....  Yes  No

Correct Interpretations	Seldom	Sometimes	Generally	Always
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Accurate ball out of play advice				
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Signals	Seldom	Sometimes	Generally	Always
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The flag was carried in the hand nearest the referee				
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The assistant referee made eye contact before raising the flag				
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Flag stable when running				
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Personality and Appearance	Seldom	Sometimes	Generally	Always
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Portrayed positive image; interested				
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Maintained upright stance				
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Fitness and Movement	Seldom	Sometimes	Generally	Always
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Side stepped effectively				
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Turned and sprinted when needed				
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Positioning	Seldom	Sometimes	Generally	Always
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Maintained 'squareness' to pitch				
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Followed ball through to goal line for goal kicks and corners				
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Kept in line with 2nd last defender/ball				
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**Comments**

Name of Coach \_\_\_\_\_