



BCSA Referee Assessment Form
Valid for Class 4 & 5 – Mentorship Assessment
(Please note: this is not an Official Provincial Assessment Form)

Please Print clearly or type information

Name:	
Date of Match	
Park / Location	
Home Team Name	
Away Team Name	
Competition / Division	

Appearance:

Positioning & Movement:

Signals & Application of the Laws:

Overall Control & Authority:

Assessor:		Excellent	Very Good	Good	Fair	Below Standard
Phone #:		(86-100)	(76-85)	(66-75)	(55-65)	(0-54)
Mark:						