

LDSA Referee Evaluation Survey

Referee: _____ Date of game ___/___/_____ Time: ___:___

Field: _____ Division: _____

Home Team _____ Away Team _____

Please evaluate the referee's performance in the following categories:
(please circle one)

	Easy to referee	Average	Difficult
Was the game:			
Did your team	Win	Lose	Draw
Control of the game	Good	Fair	Poor
Manners/Professionalism	Good	Fair	Poor
Knowledge of rules	Good	Fair	Poor
Movement of pitch	Good	Fair	Poor
Consistency and fairness	Good	Fair	Poor
Clear hand signals	Good	Fair	Poor
Overall flow of game	Good	Fair	Poor
Effort	Good	Fair	Poor

Additional comments on referee's performance

Please fill this form out as fairly and honestly as possible. This form is confidential and will only be viewed by the referee committee to assist in evaluating our referees. Please do not discuss with other players or officials. Thank you in advance for your cooperation.

Completed forms shall be emailed to [lds.admin@mymysa.ca](mailto:ldsadmin@mymysa.ca)