



Scouting Program Player Identification Form

Scout Name: _____
 Scout Phone: _____
 Scout Email: _____
 Event: _____
 Game: _____
 Field: _____
 Time: _____
 Age Group: _____

Rating Scale
 5 = National Pool
 4 = Regional Team
 3 = Regional Pool
 2 = State Team
 1 = State Pool

Name: _____	Team: _____	Jersey #: _____ Position: _____
Criteria	Rating	Comments
Athleticism		
Technical Quality		
Tactical Awareness		
Attacking Play		
Defending Play		
Versatility		
Overall		

Name: _____	Team: _____	Jersey #: _____ Position: _____
Criteria	Rating	Comments
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Technical Quality		
Tactical Awareness		
Attacking Play		
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Versatility		
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Name: _____	Team: _____	Jersey #: _____ Position: _____
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