

SPECIAL OLYMPICS TEXAS

Soccer Team Evaluation Questionnaire

Delegation Name: _____ Delegation ID: _____
Team Name: _____ Head Coach: _____

TEQ is for: 5-a-side Unified 5-a-side 11-a-side Unified 11-a-side

All questions pertain to your best 5 players. (There should be no answers greater than 5.)

OFFENSE

How many players:

- Can dribble the ball up the field with token defensive pressure (not attempting to steal ball)? _____
- Can dribble the ball up the field with aggressive defensive pressure (attempting to steal ball)? _____
- Can dribble the ball well enough to create a scoring opportunity with defensive pressure? _____
- Can pass the ball to an open teammate 50% of the time? _____
- Can shoot the ball on goal with enough power to go past a goalkeeper from 15 yards away 50% of the time? _____

DEFENSE

How many players:

- Can clear the ball (kick it) over 20 yards up the field? _____
- Will aggressively go after a loose ball on the field? _____

GOALKEEPING

- Goalkeeper can block a shot coming directly at him/her
0% 25% 50% 75% 90% of the time. (Check the highest percentage.)
- Goalkeeper can catch a shot coming directly at him/her
0% 25% 50% 75% 90% of the time. (Check the highest percentage.)
- Goalkeeper can move to save (prevent from scoring) shots that are on goal but not going directly at him/her
0% 25% 50% 75% 90% of the time. (Check the highest percentage.)

TEAM PLAY

- How many dominant players (players who understand the game, anticipate where the ball will go, move aggressively for the ball and can dominate with their scoring) do you have in your starting five? _____

Identify by name and jersey number if possible:

Player Name: _____ Jersey #: _____ Player Name: _____ Jersey #: _____
Player Name: _____ Jersey #: _____ Player Name: _____ Jersey #: _____

SUBS

- How many subs do you have? _____
- Does it make a significant difference in your team if you substitute 1 or 2 subs at the same time? _____

If yes, please explain. _____

OVERALL

- Is this the same team which played in last year's area? regional? and/or state? (Check all that apply.)
- Is this team: lower? higher? the same?

Please check only one box and explain. _____

- On a scale of 1-10, with a 1 being a level just above individual skills and 10 being just below an average Unified Sports team, please rank the ability level of your team. _____

Note: This sheet will be utilized for pre-classification, compared to the classification evaluations, and utilized throughout play as needed.