



# PROSPECTS ACADEMY

## Player Profile

**Thank you for taking the time to complete this evaluation.** Your feedback helps us better understand each student-athlete and allows us to provide personalized academic and athletic support.

## Student-Athlete Information

**Student-Athlete Name:** \_\_\_\_\_

**Sport:** ☐ Hockey ☐ Soccer

**Team/Club:** \_\_\_\_\_

**Coach's Name/Title:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Length of Time Coaching This Athlete:**

☐ Less than 1 Season

☐ 1 Season

☐ 2–3 Seasons

☐ 4+ Seasons

**Player's Position(s):** \_\_\_\_\_

# 1. Character

Describe this student-athlete as a person.

How does the athlete respond to coaching and constructive feedback?

Describe the athlete's work ethic.

# 2. Teammate & Leadership

How would you describe this athlete as a teammate?

How does the athlete contribute to team culture?

Leadership Qualities (Check all that apply)

☐ Leads by Example

☐ Vocal Leader

☐ Positive Attitude

☐ Encourages Others

☐ Accountable

☐ Respectful

☐ Coachable

☐ Self-Motivated

☐ Other: \_\_\_\_\_

# 3. Sport-Specific Evaluation

Complete the section for the respective sport you coach.

## HOCKEY PLAYER EVALUATION

| Skill           | Needs Improvement        | Developing               | Proficient               | Advanced                 |
|-----------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Skating         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Puck Handling   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Passing         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Shooting        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Defensive Play  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Offensive       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Awareness       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Hockey IQ       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Physical Play   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Competitiveness | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Coachability    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## SOCCER PLAYER EVALUATION

| Skill                      | Needs Improvement        | Developing               | Proficient               | Advanced                 |
|----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Ball Control / First Touch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Passing Accuracy           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Dribbling                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Shooting / Finishing       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Defensive Ability          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tactical Awareness         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Speed & Agility            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Decision Making            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communication              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Coachability               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## 4. Strengths

Athletic Strengths

Leadership Strengths

Personal Character Strengths

## 5. Areas for Growth

Athletic Development

Mental Performance

Leadership Development

Personal Development

## 6. Overall Evaluation

How would you rate this athlete overall?

- ☐ Exceptional
- ☐ Above Average
- ☐ Average
- ☐ Developing

## 7. Additional Comments

Is there anything else Prospects Academy should know to best support this student-athlete?

### Coach Verification

I certify that the information above reflects my honest evaluation of this student-athlete.

**Coach Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Organization/Club:** \_\_\_\_\_