

ROCKVILLE CENTRE BASKETBALL LEAGUE

YEAR END EVALUATION SHEET

COACH: _____

DATE: _____

Please rate player on a scale of 10 (highest) to 1 (lowest) based on skill level.

	Player's Name	Grade	Height	Rating
1.			S - M - T	
2.			S - M - T	
3.			S - M - T	
4.			S - M - T	
5.			S - M - T	
6.			S - M - T	
7.			S - M - T	
8.			S - M - T	
9.			S - M - T	
10.			S - M - T	
			S - M - T	
			S - M - T	
			S - M - T	
			S - M - T	
			S - M - T	

PLEASE USE THIS SPACE AND THE BACK OF THIS FORM FOR ANY COMMENTS YOU WOULD LIKE TO SEND TO THE COORDINATORS. THANK YOU.