



MWFA PLAYER ASSESSMENT FORM 2025

Club: _____

Player's Name: _____

Date of Birth: _____

Please Tick the Appropriate Box:

Playing Above Age ☐

Girls Playing in a Mixed Competition ☐

Football Checklist:

Assessed at either game and/or training by Accredited Football Coach

From your observations do you believe:

The player can match the physical demands? Yes / No

The player can match the technical elements? Yes / No

The player possesses the strength and stamina? Yes / No

Emotional/Personality Checklist:

From your observations do you believe the player:

Can they fit-in emotionally with their team members? Yes / No

Has sufficient maturity/personality to compete in the competition?

Size/ Physique Checklist:

From your observations do you believe the player is comparable in terms of the measures below to an average participant in the higher age group: Yes / No

Height (please note height here)_____ kg.

Weight (please note weight here)_____ cm.

FOOTBALL COACH ASSESSMENT

Do you believe the player should be permitted to Play Above age/Mixed Competition Yes / No

COACHES COMMENTS

ASSESSMENT BY:

Name: _____

Position at Club: _____

Coach Accreditation: _____

Signature: _____

Date: _____