**Volleyball Tryout Evaluation Form**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tryout#\_\_\_\_\_\_\_\_\_\_\_

Are you right or left handed?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tryout for : (S)\_\_\_\_\_(OH)\_\_\_\_\_(MH)\_\_\_(RS)\_\_\_\_\_\_(DS)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School/Club:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone no.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Athlete Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*DO NOT WRITE BELOW THIS LINE*

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| --- | --- | --- |
| **Push-up** | **Jump Rope** | **Pacer** |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Skill** | **Rating Scale 5 is Highest** | **Coach’s Remark** |
| Serve | 1 2 3 4 5  |  |
| Pass  | 1 2 3 4 5 |  |
| Set  | 1 2 3 4 5 |  |
| Attack  | 1 2 3 4 5 |  |
| Dig  | 1 2 3 4 5 |  |
| Block  | 1 2 3 4 5 |  |
| Movement/footwork | 1 2 3 4 5 |  |
| Leadership  | 1 2 3 4 5 |  |
| Follow Direction  | 1 2 3 4 5 |  |
| Coachable  | 1 2 3 4 5 |  |
| Shagging  | 1 2 3 4 5 |  |

Note/Recommendations:­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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