Name of Player: **Name of Observer:**

Soccer Assessment Sheet--Left Foot Shot

The observer should watch the player shoot for a few minutes. During this time, the observer should look to see if the player is in the habit of performing the key points listed below. The observer should circle **YES** or **NO** to indicate this for each key point.

Right foot planted next to ball and toe pointed to target	**Yes**	**No**
Left toe pointed to ground	**Yes**	**No**
Left knee over the ball	**Yes**	**No**
Contact ball with shoe laces	**Yes**	**No**



Front View



Back View

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