

Peer Assessment – Passing

**Team Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Coach/Evaluator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Passing**

* Steps forward
* Uses crisp (quick, sharp) passes
* Provides adequate force
* Executes follow through

**P** = Passed **N =** Needs more practice

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** | **One hand**  **Chest Pass** | **Two Hand Chest Pass** | **Bounce Pass** | **Two Hands**  **Overhead Pass** | **Step Around** |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| 5. |  |  |  |  |  |
| 6. |  |  |  |  |  |
| 7. |  |  |  |  |  |
| 8. |  |  |  |  |  |