itroduction					
he 2023 Wor	d U-24 Ultimate	Championship	s that will repr	U-24 National Tear esent the USA well, recommendation i	bot
he player re	commendations r	nust be submi	tted no later th	an August 28.	
1. What is the o nicknames).	name of the playe	er you are recom	nmending? (Full f	first and last name, pl	ease
* 2. What is	he WFDF competi	tion gender of t	he applicant?		
Woman-M	atching				
Man-Mat	ching				

## **Personal Information** This set of questions will provide us basic information about yourself. \* 3. Name (First and Last): \* 4. Contact Information: City/Town: -- select state --State: **Email Address: Phone Number:** $\ast$ 5. What is your experience with the sport of ultimate? (briefly – as a player and/or as a coach) If your experience with ultimate is limited, then please describe your experience with sports other than ultimate. \* 6. What experience outside of ultimate do you have working in sports and/or with this age group (under 24)?

Player Information
This set of questions will provide us information about the player you are recommending.
* 7. What is your relationship to this player?
* 8. How long have you known this player? (Years)
* 9. Please describe their offensive strengths and the role they play on the field.
* 10. If this player asked you to identify the 2-3 most important specific skills or abilities that they should work on to improve as an offensive player, what would you say?
* 11. Please describe their defensive strengths and the role they play on the field (What type of player do they guard? What can you count on them to do? What position do they play in a zone? Etc.).
* 12. If this player asked you to identify the 2-3 most important specific skills or abilities that they need to work on to improve as a defensive player, what would you say?

* 13. How does this player typically respond:
To feedback?
When they are not performing their best in a game?
When a teammate is having a belowaverage game?
When their team is struggling with performance or focus?
When external mental or physical circumstances challenge them at practice?
* 14. What helps this player implement coaching feedback most quickly?
* 15. Please give one example of this player's typical on-field attitude:
* 16. Please describe the players strengths as a teammate, and where they have potential to improve.
* 17. Please describe any experience the player has promoting an inclusive team environment and working with many personalities in a team setting.
* 18. Please describe any experience the player has that may translate to contributing to a mixed gender team?

* 19. Please provide an example illustrating why this player would be a strong contributor to
a U.S. National Team tryout.
* 20. This player is(fill in the blank with a number):
One of the top
athletes on their team.
Among the top
athletes under the age
of 24 in their region.
One of the top throwers on their
team.
Among the ten
Among the top throwers under the
age of 24 in their
region.
One of the top
defenders on their team.
Among the top defenders under the
age of 24 in their
region.
One of the top
overall players on their team.
Among the top overall players under
the age of 24 in their
region.
* 21. For the question above, what team, division (club/college/youth), and region are you
referring to?
*00 II
* 22. How would you rate this player according to the following scale (choose a number):
$\bigcirc$ 1 = Good enough now to be a contributor of a club nationals-qualifying team
$\bigcirc$ 2 = Good enough now to make the roster of a club nationals-qualifying team or be a go-to playmaker on a top-8 D1 college nationals team
$\bigcirc$ 3 = Good enough now to be a role player on a top-8 D1 college nationals team
$\bigcirc$ 4 =Good enough now to be a go-to playmaker on a top-5 D1 college regionals team
$\bigcirc$ 5 = None of the above

	e sport of ultimate, the Spir	t of the Game, USA Ulti	
National Team?  Yes			
O No			
. If not, please expla	in:		
* 25. I recommend t	his player:		
With Highest Rega	rd		
Without Reservation	on		
With Reservations			
	recommendation for more s and describe your thought		

Signature
Please sign this recommendation by filling in your first and last name and date below:
* 28. Name:
* 29. Date:
Today's Date:  Date  MM/DD/YYYY