

*Please list performance barriers that have occurred within the last 2 weeks
(such as negative thoughts, negative emotions, interpersonal problems, lack of concentration, etc.)*

0	1	2	3	4	5	6	7	8
None	Mild		Moderate		Strong		Extreme	

Please rate each of the following using the 0-8 scale above:

Performance Domain	Satisfaction with Performance	Impact of Performance Barrier
Practice & Training		
Competition		
Relationships with Coaches		
Relationships with Teammates		
Other (please describe):		