# FOOTBALL ASSOCIATION OF IRELAND
CUMANN PEILE NA Heireann

**DIVISION** _____

A. _____ V B. _____
(Home Team) (Away Team)

Venue _____

Date _____ at _____ hours

Full Time Score: Home Team ☐ Away Team ☐

Score A.E.T.: Home Team ☐ Away Team ☐

Penalties: Home Team ☐ Away Team ☐

Referee _____

Assistant Referee 1 _____

Assistant Referee 2 _____

Fourth Official _____

Referee Codes
C1 – Unsporting Behaviour
C2 – Dissent
C3 – Persistently infringing the Laws of the game.
C4 – Delaying the restart of play.
C5 – Failing to respect the required distance when play is restarted
C6 – Entering or re-entering the field of play without the referee's permission
C7 – Deliberately leaving the field of play without the referee's permission

S1 – Serious foul play
S2 – Violent Conduct
S3 – Spitting at an opponent or any other person
S4 – Denying the opposing team a goal or clear goal-scoring opportunity by deliberately handling the ball.
S5 – Denying a clear goal-scoring opportunity to an opponent by committing an offence punishable by a free-kick.
S6 – Denying a clear goal-scoring opportunity to an opponent by committing an offence, that in the referee's opinion the offending player had no possibility of playing the ball.
S7 – Using offensive, insulting or abusive language or gestures.
S8 – Second caution during the same match

| **Players** | **HOME TEAM** | | **Referee Use Only** | | | |
|---|---|---|---|---|---|---|
| **No.** | **First Name** | **Surname** | YC | | RC* | Goals |
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| **Substitutes 5 from 7** | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| **No.** | **First Name** | **Surname** | Replaced | Time | YC | | RC* | Goals |
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**TECHNICAL STAFF**

*Please provide supplementary report for any expulsions

| **No.** | **First Name** | **Surname** | **Role** |
|---|---|---|---|
| 1 | | | Manager/Head Coach |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| | | | **Doctor** |

Manager's Signature:

**It is IMPERATIVE that a soft-copy of this Report is forwarded to the Third Level Football Department of the FAI immediately by e-mail (cufl@fai.ie) and hard-copy by post to Third Level Football, FAI, National Sport Campus, Abbotstown, Dublin 15 within 24 hours.**

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S7 – Using offensive, insulting or abusive language or gestures.
S8 – Second caution during the same match

| **Players** | **AWAY TEAM** | | **Referee Use Only** | | | |
|---|---|---|---|---|---|---|
| **No.** | **First Name** | **Surname** | YC | | RC* | Goals |
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|---|---|---|---|---|---|---|---|---|
| **No.** | **First Name** | **Surname** | Replaced | Time | YC | | RC* | Goals |
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**TECHNICAL STAFF**

| **No.** | **First Name** | **Surname** | **Role** |
|---|---|---|---|
| 1 | | | Manager/Head Coach |
| 2 | | | |
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| 4 | | | |
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