

# Request for Evaluation

**To: Meet Referee,**

**Qualifying Meet:** VSI LC Age Group Championships ,

**Meet Dates:** 19-22 Jul 2007

**Meet Location:** Midtown Aquatics Center, Newport News, VA ,

**LSC:** VA

Mail to: Michael Willard 5517 Swan Road Williamsburg, VA 23188-9418 or e-mail: jefwilfam@cox.net

or fax: ( )

**Please consider me for assignments at the above meet so that I may be evaluated as follows:**

**Name:** \_\_\_\_\_ **LSC:** \_\_\_\_\_, USA S Reg # \_\_\_\_\_

**email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

|                                | Levels                          | <input type="checkbox"/> V1    | <input type="checkbox"/> N1 | <input type="checkbox"/> N2 | <input type="checkbox"/> V2 | <input type="checkbox"/> N3 | <input type="checkbox"/> None |                                  |
|--------------------------------|---------------------------------|--------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-------------------------------|----------------------------------|
|                                |                                 | (Choose one for each position) |                             |                             |                             |                             |                               |                                  |
|                                |                                 |                                |                             |                             |                             |                             |                               | Years•months<br>at Highest Level |
| <b>Current Certifications:</b> | <b>Stroke &amp; Turn Judge:</b> | <input type="checkbox"/>       | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>      |                                  |
|                                | <b>Chief Judge:</b>             | <input type="checkbox"/>       | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>      |                                  |
|                                | <b>Starter:</b>                 | <input type="checkbox"/>       | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>      |                                  |
|                                | <b>Deck Referee:</b>            | <input type="checkbox"/>       | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>      |                                  |
|                                | <b>Administrative Referee:</b>  | <input type="checkbox"/>       | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>      |                                  |
|                                | <b>Timing System Operator:</b>  | <input type="checkbox"/>       | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>      |                                  |
|                                | <b>Timing Judge:</b>            | <input type="checkbox"/>       | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>      |                                  |
|                                | <b>Recorder:</b>                | <input type="checkbox"/>       | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>    | <input type="checkbox"/>      |                                  |

**Requested Evaluations:** (You must work at least 4 sessions at the meet for an evaluation to be validated.)

For Re-certification at V2/N2 as -  **S&T**,  **CJ**,  **Starter**,  **Ref**,  **Admin Ref**  
 **TSO**,  **TJ**,  **Recorder**

For Advancement towards V2/N2 -  **S&T**,  **CJ**,  **Starter**,  **Ref**,  **Admin Ref**  
 **TSO**,  **TJ**,  **Recorder**

**Recent Evaluations** ("Met Standard", or better, in previous 24 months):

1. For Re-certification at V2/N2 -  **S&T**,  **CJ**,  **Starter**,  **Ref**,  **Admin Ref**  
 **TSO**,  **TJ**,  **Recorder**

2. For Advancement towards V2/N2 -  **S&T**,  **CJ**,  **Starter**,  **Ref**,  **Admin Ref**  
 **TSO**,  **TJ**,  **Recorder**

Evaluator Names for previous evaluations in 1. and 2. above:

Eval for: \_\_\_\_\_ Evaluator's Name: \_\_\_\_\_

Eval for: \_\_\_\_\_ Evaluator's Name: \_\_\_\_\_

**Your Request:**  **sorry, cannot be accommodated.**  Too many requests. Please apply again.  
 You are not yet eligible. Please work on it.  
 **can be accommodated as follows:**

For Re-certification at V2/N2 as -  **S&T**,  **CJ**,  **Starter**,  **Ref**,  **Admin Ref**  
 **TSO**,  **TJ**,  **Recorder**

For Advancement towards V2/N2 -  **S&T**,  **CJ**,  **Starter**,  **Ref**,  **Admin Ref**  
 **TSO**,  **TJ**,  **Recorder**

