Request for Evaluation

To: Meet Referee				W (D)	40.04.1440
Meet Location:	PVS Junior Olympic Championships Fairland Aquatics Center			Meet Dates: LSC:	18-21 Mar 10 PV
Mail to:	- amana / iquatios o		e-mail:		or fax: (555) 555-555
Please consider ı	me for assignments	at the above	meet so that I	may be evaluated	d as follows:
Name:			LSC: , L	JSA S Reg#	
email:		PI	hone:		
Mailing Address:					
Current Certificat	ions: Stroko 9 T	V	SC N2 N3 (Choose one for each po	None Years∙month at Highest Lev	
Current Certificat	Cł	nief Judge: Starter: k Referee:			
For Re-certification For Advancement For Final Evaluatio Recent Evaluatio 1. For Re-certification at 2. For Advancement to 3. For Final Evaluation Evaluator Names for preval for: Eval for:	towards N2 or N3 - on as N3 - ns ("Met Standard", or at N2 or N3 - owards N2 or N3 - as N3 - orevious evaluations in 1. Evaluator's Name: Evaluator's Name:	□ S&T, □ C □ S&T, □ C □ CJ*, □ Sc better, in previous S&T, □ CJ, S&T, □ CJ, □ CJ,	CJ,	Ref, Ad R Ref, Ad Ref*, Ad Ref*, Ad Ref* (choose) Ref, Ad Ref Ref, Ad Ref Ref, Ad Ref Ref, Ad Ref Ad Ref Ad Ref	ef (choose up to 2) use 1, if eligible.) f (choose all applicable) f (choose all applicable) f le if all prerequisites net and the meet is
Eval for:	Evaluator's Name:			approved for	Final Evaluations.
	sorry, cannot be a can be accommodon at N2 or N3 as - at towards N2 or N3 - as N3 -	lated as follows	☐ You are note: S: CJ, ☐ Starter	, ☐ Ref, ☐ Ac	
Date: Send	"Confirmation"/"Sorry" to	applicant. Send a	copy of accepted	applications to Evaluat	ors.

