

Request for Evaluation

To: Meet Referee, Pam Starke-Reed

Qualifying Meet: 2011 PVS Junior Olympic Championships

Meet Dates: 17-20 Mar 11

Meet Location: Fairland Aquatics Center, Laurel, MD

LSC: PV

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 LSC N2 N3 None
(Choose one for each position)

Current Certifications:	Stroke & Turn Judge:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Chief Judge:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Starter:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Deck Referee:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Administrative Referee:	<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 N2 as - S&T, CJ, Starter, Ref, Ad Ref

For Advancement towards N2 - S&T, CJ, Starter, Ref, Ad Ref

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

1. For Re-certification at N2 - S&T, CJ, Starter, Ref, Ad Ref (choose all applicable)

2. For Advancement towards N2 - S&T, CJ, Starter, Ref, Ad Ref (choose all applicable)

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

Eval for: _____ Evaluator's Name: _____

Eval for: _____ Evaluator's Name: _____

Eval for: _____ Evaluator's Name: _____

Eval for: _____ Evaluator's Name: _____

Eval for: _____ Evaluator's Name: _____

