Request for Evaluation

To: Meet Referee	, PVS Long Course Senior	Championships	Meet Dates: 14-17 JUL 11_
Meet Location:	University of Maryland	<u>Championships</u> ,	LSC: PV
Mail to: Jack Neill, PVS O	fficials Chair	or e-mail: JJNeill@fcps	.edu or fax: ()
Please consider r	ne for assignments at the	above meet so that I r	may be evaluated as follows:
Name:		LSC:, US	SA S Reg#
email:		Phone:	
Mailing Address:			
	Leve	Is 🖒 LSC N2 N3 ∃	None Years•months
		(Choose one for each posit	ion) at Highest Level
Current Certificat		_ = = =	
	Chief Jud		
	Star		
	Deck Refe		
	Administrative Refe	ree: 📙 📙	
Requested Evalua	ations: (You must work at least 4 se	essions at the meet for an evalua	ation to be validated.)
For Re-certification at N2 or N3 as - S&T, CJ, Starter, Ref, Ad Ref (choose up to 5)			
For Advancement	towards N2 or N3 -	T, ☐ CJ, ☐ Starter,	Ref, Ad Ref (choose up to 2)
For Final Evaluation	on as N3 -	*, 🗌 Starter*, 🗌 Ref*	, Ad Ref* (choose 1, if eligible.)
Recent Evaluation	ns ("Met Standard", or better, i	n previous 24 months):	
1. For Re-certification		<u> </u>	Ref, Ad Ref (choose all applicable)
2. For Advancement to			Ref, Ad Ref (choose all applicable)
3. For Final Evaluation		☐ CJ, ☐ Starter, ☐	· · · · · · · · · · · · · · · · · · ·
Evaluator Names for p	previous evaluations in 1. and 2. ab	_	,
Eval for:	Evaluator's Name:		* Only available if all prerequisites
Eval for:	Evaluator's Name:		have been met and the meet is
Eval for:	Evaluator's Name:		approved for Final Evaluations.
Your Request:	sorry, cannot be accomme		equests. Please apply again. t yet eligible. Please work on it.
	can be accommodated as	follows:	
For Re-certification	— on at N2 or N3 as - ☐ S& '	T,	☐ Ref, ☐ Ad Ref
For Advancement towards N2 or N3 - S&T, CJ, Starter, Ref, Ad Ref			
For Final Evaluat		☐ CJ*, ☐ Starter*,	
. J IIIdi Evalual			
		, Meet Referee.	
Det			
Date: Send	"Confirmation"/"Sorry" to applicant.	. Send a copy of accepted a	oplications to Evaluators.

