

OFFICIAL RATING FORM



SURNAME: _____ GIVEN NAME: _____

ADDRESS: STREET: _____

CITY: _____

PROVINCE: _____ P.C. _____

e-mail: _____

PHONE: Home () _____ Work () _____

DATE: _____		# OF GAMES OBSERVED: _____		TOTAL SCORE: _____		/100	
LEVEL:		TYPE:		RATING SCALE:			
Nationals		Men		Excellent		9 or 10	
CWBL Finals		Women		Above average		7 or 8	
JR. Nationals		Co-ed		Average		5 or 6	
Provincials				Below average		3 or 4	
League				Very weak		1 or 2	

APPEARANCE (physical condition, mannerisms, attire)

ATTITUDE (professionalism, poise, manner)

RULES (knowledge, application, consistency)

MECHANICS (positioning, movement, coverage)

SIGNALS (clarity, correctness, pace of delivery)

GAME CONTROL (handling of players, coaches, spectators)

JUDGEMENT (consistency of calls, use of common sense)

HUSTLE (regardless of game level or intensity)	
CONFIDENCE (poised, able to make the tough calls)	
TEAMWORK (with partner(s) and table officials)	

GENERAL COMMENTS:

AREAS OF STRENGTH

AREAS NEEDING IMPROVEMENT

RECOMMENDATIONS:

(What should happen with this official in the near future?)

ASSIGNER/EVALUATOR:

Original to the National Office

Copy to the Observed Official
