



# JUDGE EVALUATION FORM

*\*Incomplete and unsigned forms will not be accepted*

**Name of Judge:** \_\_\_\_\_

**District Meet and dates judged:** \_\_\_\_\_

**Person filling out evaluation:** (Must include name AND what role you have in OHSET i.e. coach, parent, athlete, district official.)

**Please rate the following categories:**

Poor	Needs Improvement	Average	Better than average	Excellent
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Efficient while judging:	1	2	3	4	5
Professional:	1	2	3	4	5
Prepared:	1	2	3	4	5
OHSET rules knowledgeable:	1	2	3	4	5
Courteous:	1	2	3	4	5

**Competence in the following areas: (list classes judged below)**

_____	1	2	3	4	5
_____	1	2	3	4	5
_____	1	2	3	4	5
_____	1	2	3	4	5
_____	1	2	3	4	5
_____	1	2	3	4	5

**Additional Comments:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Mail completed forms to:** JoAnn Oswald 31404 Franks Creek Rd Dayville OR 97825