Chesapeake Region Junior Scorer Evaluation Form

This form **must** be signed by a USAV Provisional (2+ yrs.) or above, Scorer or Referee after they have reviewed your completed scoresheet. Any questions email **scorer.certification@chrvavb.org**.

When you have received the necessary number of evaluations, you must upload this form to the Academy LMS in the scorer rating/evaluation form module.

To receive certification, this must be completed and submitted by April 1st

Print Candidate Name:_____ **Print** Club & Team Name_____

Print Candidate Address: _____
Street City State Zip

Print Candidate email address:_____

Print Coach, or Club Representative e-mail address:_____

First Evaluation Enter tournament Date _____/_____/_____	**For Reviewer:** Please look over each of these points on the scoresheet and check off. Give "how to" instructions for items missed, sign, date, and return to scorekeeper.	**Second Evaluation** Enter tournament Date _____/_____/_____
	Recorded Match info in pen including officials names	
	Recorded Set start time (pen)	
	Recorded first server/receiver correctly, i.e. 3xs (pen)	
	Monitored correct server	
	Recorded captain's correctly. Use square for roster captain, circle for line up captain and half boxes for additional captains	
	Recorded team info in pencil after start time recorded	
	Recorded exit scores correctly (tiny check marks on # in box)	
	Recorded points correctly (slashed running score column)	
	Recorded substitutions correctly	
	Recorded sanctions correctly	
	Recorded unusual info correctly in remarks section	
	Forwarded sanctions & unusual info to next set	
	Recorded end of each set score correctly (pen)	
	Recorded each set end time correctly (pen)	
	Circled each team's final exit score in service round section (pen)	
	T-bar unused points in the running score column (pen)	
	Signed scoresheet (pen)	
	Gave completed scoresheet to first referee for signature (pen)	

_____ _____
Rater's Signature/Region Date

_____ _____
Rater's Signature/Region Date

_____
Print Rater's Name

_____
Print Rater's Name

NOTE: Signature of certifying Official USAV Provisional (2+ yrs.) or above certification (cannot be Junior only certification)