Chesapeake Region Junior Scorer Evaluation Form



This form <u>must</u> 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

nt Candidate Name:		Print Club & Team Name				
Print Candidate Address:						
	Street	City	State	Zip		
nt Candidate email add	ress:					
-A Carala au Chala Dana		d				
nt Coach, or Club Repr	esentative e-maii ad	uress:				
	For Reviewer: Pl					
irst Evaluation	scoresheet and che			ions for items	Second Evaluation	
Enter tournament Date	missed, sign, date, and return to scorekeeper.			Enter tournament Date		
/					/	
	Recorded Match in	ofo in nen includ	ing officials na	ames		
	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)					
		01 0 01100	1010100 101 018	(p v)		
er's Signature/Region	Date		Rater's Si	gnature/Region	Date	
t Rater's Name			Print Rate	• NT		

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