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| Name: Date: Committee: Coastal Address: DesertCity: State: Zip Code: Eastern Home Phone: Work Phone: MetroCell Phone: E-mail: Orange Pacific Unat |
| Current Certification: **N1** Expires: **N2** Expires: **N3 Stroke and Turn** **Chief Judge** **Starter Deck Referee**I am applying for: Certification EvaluationDeck Referee Meet Referee - TF Meet Referee – HF | Expires: |
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| Qualifications for the Position: |
| **Deck Referee** | **Meet Referee - TF** |
| USA-S required tests passed under 80%Must have worked as a Certified Stroke and Date certified as S/T:Turn/Relay Take-off Judge for a minimumof 1 year to include 25 sessions.Apprentice with two different Meet Number of apprentice sessions:Referees for a minimum of 12 sessions (3separate meets). | USA-S required tests passed under 80% Must have worked as a Certified Deck Date certified as Deck Referee:Referee for a minimum of 1 year to include 12 sessions.Apprentice with two different Senior Number of apprentice sessions:Referees for a minimum of 12 sessions (3separate meets). |
|  | **Meet Referee – HF** |
|  | USA-S required tests passed under 80% Must have worked as a Certified Meet Date certified asReferee – TF for a minimum of 2 years to Meet Referee - TF:include 50 sessions.Date certified asBe certified as an Administrative Official - TF: |
| Administrative Official - TF |  |  |
|  | Apprentice with two different Meet Number of apprentice sessions:Referees – HF for a minimum of 6 sessions(3 separate Heats and Finals meets). |

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| SCS Deck Referee / Meet Referee TF / Meet Referee HF EvaluationApplicant has meet or exceeded expectations for certification Applicant has NOT meet expectations for position, furthertraining is recommended |
| Please rate each area by number: Needs Further | Training  1 2 3 | 4 | 5  Outstanding |
| **General (Everyone)**Appearance Attitude Composure ReliableKnowledge of USA-S and SCS Rules Interaction with Athletes, Coaches Meet Operations**Deck Referee**Position on deckWatches Pool / Deck Officials Radio usageMeet PaceQueries about DQ Calls Starting Sequence / False Starts Application of No Show Rules Consistency of Decisions Overall PerformanceComments or Recommendations: (Type below) | **Meet Referee - TF** Pre/Post Meet Procedures Meet FormsKnowledge of Admin Operations Seeding / ScratchingResultsKnowledge of All Officials Duties Timing System OperationsDeck Staffing/Assignments LeadershipInterfacing with Meet Volunteers Knowledge of OTSOverall Performance | **Meet Referee - HF**LeadershipHeats and Finals Rules Heats & Finals Scheduling Times Reconcilation Finals ScratchFinals Seeding Swim-off scheduling Knowledge of OTS Overall Performance |
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| Evaluator’s Name: SCS Section Rep: |  | Date: Date: |

# Minimum Standards for certification can be found on the SCS web site <http://www.socalswim.org/>

Evaluators: Fill out the form and attach to an email to the SCS official’s chair, geo committee officials chair and copy the official that is being evaluated.