

OHSET STATE JUDGES' CHAIR
 c/o Anne Garrett
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 state.judges@ohset.com



JUDGE EVALUATION FORM

Name of Judge _____ Email _____

Mailing Address _____

Who is filling out evaluation? _____ District: _____

Date(s) Judged: _____

(On a scale of 1 to 5: 5 = Excellent, 4 = better than average, 3 = average, 2 = needs improvement, 1 = poor) Please rate the following categories:

Was the judge..... On time:	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: _____

 Show Management/Coach/Advisor/Athlete/Other
 (circle one)

 Date