



Southern Region Volleyball Association Scorer Rating Sheet

To Be Filled Out By Candidate

Date: _____

Name: _____ E-Mail: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Club/Team Name: _____

Rating for: Junior Adult Provisional Regional (*Must be Provisional for 1 yr. min.*)

To Be Filled Out By Rater

Tournament: _____ Location: _____

Division: Women Men Co-ed Category: Junior Adult

Level: Age Group (fill in age) AA A BB B

Teams: _____ v.s. _____

Observed candidate before, during and after each game If no subs occurred, discussed procedure of recording and handling
 Scoresheets examined and discussed with candidate after match If no 3rd game sheet used, discussed how it differs

Rating Entries: + Above Average ✓ Average - Needs Improvement

Pre-Game Procedures

- | | |
|---|---|
| <input type="checkbox"/> Records heading information before match starts in all caps (both scoresheets if applicable)
<input type="checkbox"/> Complete OFFICIALS section before match starts (both scoresheets if applicable)
<input type="checkbox"/> Checks Rosters (if available)
<input type="checkbox"/> Checks Line-ups for Captains & Signatures | <input type="checkbox"/> Records Line-ups correctly
<input type="checkbox"/> Enters game number (if applicable)
<input type="checkbox"/> Places 3 Xs in S, R and the receiving team's <input checked="" type="checkbox"/>
<input type="checkbox"/> Confirms Line-ups on floor prior to first serve
<input type="checkbox"/> Records game start time
<input type="checkbox"/> Communicates well with referees |
|---|---|

During-Game Procedures

- | | |
|--|---|
| <input type="checkbox"/> Records playing action correctly (check marks and exit scores)
<input type="checkbox"/> Checks for correct server - each serve
<input type="checkbox"/> Time-outs recorded and signaled | <input type="checkbox"/> Subs recorded and signaled
<input type="checkbox"/> Understands referee signals
<input type="checkbox"/> Recovers promptly from errors
<input type="checkbox"/> Records sanctions and comments accurately |
|--|---|

Post-Game Procedures

- | | |
|--|---|
| <input type="checkbox"/> Records game end time
<input type="checkbox"/> Correctly records game point and circles final exit scores
<input type="checkbox"/> Completes Results section accurately | <input type="checkbox"/> Hourglass unused points
<input type="checkbox"/> Checks then signs each scoresheet
<input type="checkbox"/> Turns in scoresheets |
|--|---|

Deciding-Game Procedures

- | | |
|--|---|
| <input type="checkbox"/> Records starting line-ups on left and far right
<input type="checkbox"/> Records Substitutions and Time-Outs on left and far right | <input type="checkbox"/> Records change of sides properly |
|--|---|

Difficulty of Match

- SIMPLE - no subs, no time-outs, no controversy
- AVERAGE - subs, time-outs, nothing unusual or difficult
- COMPLEX - unusual situations, cards, wrong servers, etc.
- VERY DIFFICULT - injury, exp/disq, illegal players, etc.

Rater's certification level:

- National Regional
 Jr. National

Recommendation:

- Certify Re-evaluate
 Recommend for Regional _____
Rater Initials

Rater's Notes (*use back if necessary*)

_____ Rater Signature

_____ Candidate Signature

CANDIDATE must send this form to the Officials Chair

Upload to your online Modules

Keep a copy for your records before submitting.