

OHSET STATE JUDGES'CHAIR

c/o JoAnn Oswald
16770 Ellendale Ave
Dallas, OR 97338
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