

USI Referee's Report

Meet Name:

Sanction Number:

Date:

Location:

Referee:

Starter:

Deck Officials:

Name	Position(s) Worked	Session(s) Worked	Rating*
1.			Knowledge Demeanor
2.			Knowledge Demeanor
3.			Knowledge Demeanor
4.			Knowledge Demeanor
5.			Knowledge Demeanor
6.			Knowledge Demeanor
7.			Knowledge Demeanor
8.			Knowledge Demeanor
9.			Knowledge Demeanor
10.			Knowledge Demeanor
11.			Knowledge Demeanor
12.			Knowledge Demeanor

*Ratings – Please rate each official on their knowledge of the rules and their demeanor. Rating should be a number between 0-3. For description of ratings see “Instructions to Referee” that you should have received when you agreed to officiate this meet.

Comments on officials:

Trainees:

Name	Position(s) Trained	Hours Trained	Trainer
1.			
2.			
3.			
4.			
5.			

*Please record total hours trained so far.

Comments on Trainees:

Comments on Meet:

Please return this completed form by the most convenient method to:

Officials Chairperson
c/o Chanin Gammill
370 W 600 N
Logan Ut 84321

chaningammill@gmail.com