



MIWOA
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Official's Evaluation

This form is intended for use by coaches. For that reason, only signed evaluations will be accepted. Please know that this evaluation is restricted to the President, Secretary and Commissioners of the MIWOA only. The information will be used to help us determine strengths and weakness of the official and to help them improve. Your name is kept **STRICTLY CONFIDENTIAL** unless you decide otherwise.

Please help us to improve our members by evaluating officials after each match. Proper evaluation comes with time – not when an official has an exceptionally good or bad day.

Date: _____ Coach Name: _____

Date of event: _____ Schools: _____

Type of event (Circle 1): Dual Double Dual Tri Quad Tournament

Official's Name: _____

Please rate the following items (see criteria below):

	Poor	Acceptable	Solid
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- | | | | |
|--|---|---|---|
| • APPEARANCE (general, uniform, rule book) | 1 | 2 | 3 |
| • PREPARATION (timely, pre-meet, table talk) | 1 | 2 | 3 |
| • KNOWLEDGE of RULES | 1 | 2 | 3 |
| • POISE, CONFIDENCE, CONTROL of MATCH | 1 | 2 | 3 |
| • JUDGEMENT (application of rules, consistency) | 1 | 2 | 3 |
| • COMMUNICATION (hand signals, verbal) | 1 | 2 | 3 |
| • ATTITUDE (approachability, tolerance, people skills) | 1 | 2 | 3 |
| • OVERALL: Please rate this Official's work | 1 | 2 | 3 |
| • Comments (use back of page if necessary) _____ | | | |

Poor: Unacceptable **Acceptable:** Approaching Expected Standards **Solid:** Meets/exceeds Standards

May we use your name and this evaluation with this official? Y N

Visit us at www.miwoa.org for additional evaluation information