 Starter Training Log

Official’s Legal Name: Date:

Meet Location (Short or Long Course): Number of Sessions Worked:

Number of Sessions Worked Before This Meet:

**The purpose of this form is to provide feedback of skills which need to be improve**

|  |  |  |
| --- | --- | --- |
| **X = Improvement Needed** | **R = Ready For Recommendation** | **N/A = Not Observed or Not Applicable** |

**SKILLS OBSERVED** **RATING** **COMMENT(S) ON SKILL(S) TO BE IMPROVED**

|  |  |  |
| --- | --- | --- |
| **Appearance and dress attire** |  |  |
| **Arrive on time and checked in** |  |  |
| **Attended briefing on time** |  |  |
| **Accepts assignment as given** |  |  |
| **Checks equipment before the start of each session** |  |  |
| **Understands how the starting module works and operates** |  |  |
| **Voice quality “Take Your Mark” and other commands** |  |  |
| **Teamwork with Deck Referee**  **and other Officials** |  |  |
| **Recording accurate Order Of Finish (OOF)** |  |  |
| **Knowledge of Starting Rules** |  |  |
| **Deck Position / Handling Mic** |  |  |
| **Patience, Poise, Confidence** |  |  |
| **Understands how to Start Disabled Swimmers** |  |  |
| **Ability to record distance lap Counting/Ringing Bell** |  |  |
| **Recognizes false starts/poor**  **starts** |  |  |
| **Knows how to handle mistakes/unusual situations** |  |  |

Meet Referee Name: Date:

Meet Referee Signature:

Certification Recommendation will be submitted: ( YES / NO )

Requires 100% met of all requirements above to be considered.

Please refer to the latest updated GULF Certification Guideline for eligibility.

GULF Meet Referee is required to submit a separate recommendation to support this documentation to the GULF LSC Officials Chairman ( Brian L. Walls )

Effective as of February 1, 2022. All past versions are obsolete