 Stroke and Turn 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** |  |  |
| **Deck position-in place to observe swimmers** |  |  |
| **Understands and demonstrates****lead/lag as Stroke Judge** |  |  |
| **Understands and demonstrates walking as Stroke Judge** |  |  |
| **Understands and demonstrates relay take-off procedures/cards** |  |  |
| **Understands jurisdiction** |  |  |
| **Accepts assignments given** |  |  |
| **Recognizes & reports DQs** |  |  |
| **Use of radio communication** |  |  |
| **Teamwork with other officials** |  |  |
| **Attentiveness and focused on deck** |  |  |
| **Punctual & reliable for all assignment(s)** |  |  |
| **Ability to handle distractions** |  |  |
| **Fair judgement calls** |  |  |
| **Understand the rules of all strokes** |  |  |
| **Reaction to 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