



## Apprentice Deck Referee — On-Deck Training Evaluation

Trainee Name: \_\_\_\_\_ Club: \_\_\_\_\_ Date: \_\_\_\_\_

Meet: \_\_\_\_\_ Session #: \_\_\_\_\_ Sanction: \_\_\_\_\_

Evaluation #: 1 2 3 4 5 6 7 8 9 (Circle one) Transferring DR?  Yes  No

Rating System: 5 = Proficient to perform unsupervised      A rating must be given for each skill.  
 3 = Some improvement needed  
 1 = More experience required  
 N/A = Not observed or not applicable at this session

### Pre-Meet

<b>Skill</b>	<b>Rating (#)</b>	<b>Comments (what worked well or could be improved)</b>
Arrive prior to the beginning of warm-ups, dressed and prepared for assigned duties. Check in with Meet Referee for updates/problems, confirm time & location of Stroke Briefing and what part, if any, Trainee will conduct. Review Meet Announcement for scratch & penalty procedures.		
Conduct complete Stroke Briefing (assignments, jurisdiction, deck protocol, special information). Discuss DQ reporting and use of proper language.		
Check with Administrative Official prior to session for latest updates and procedure for handling DQs, DFSs and NSs as approved by Meet Referee.		
Discuss with Timing System Operator how to communicate open lanes after start of each heat.		

### During Meet

<b>Skill</b>	<b>Rating (#)</b>	<b>Comments (what worked well or could be improved)</b>
Start the session on time.		
Have conversation with Starter about where Starter wants to position for forward & backward starts, and how false starts are to be handled.		
Assume proper position on deck to conduct meet, keeping eyes on pool and noting behavior of both swimmers and officials.		
Demonstrate proper whistle starting protocol, with ability to control fly-over starts.		
Demonstrate appropriate control of heats and proper passing of control to Starter with arm signals.		
Demonstrates appropriate radio protocol and procedures.		
Demonstrate proper DQ processing — review, return or sign-off, passing to Administrative Official.		
Demonstrate proper false start handling.		
Act as a team with Starter.		
Interact with Chief Judge(s) appropriately and make corrections to Officials' positions or behaviors, if necessary, keeping in mind the team concept.		
Session time management; response to issues impacting timeline (e.g. equipment failure, timer response)		

Respond appropriately to questions or comments from coaches, swimmers and other officials.		
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### Post Meet

<b>Skill</b>	<b>Rating (#)</b>	<b>Comments (what worked well or could be improved)</b>
Thank timers, deck officials and table personnel for their help. Answer any question and resolve any issue not otherwise covered.		
Be accessible at end of session and completes all paperwork.		
Make sure all Coaches' concerns are addressed.		
Make sure any Starter and/or Stroke & Turn Trainee cards are signed by the evaluating Referee and make arrangement with Starter(s) to discuss performance.		
Inform Meet Referee and Meet Director of any problems.		

### Other Skills

<b>Skill</b>	<b>Rating (#)</b>	<b>Comments (what worked well or could be improved)</b>
Understand rules and interpretations, have access to rule book and USAS interpretations.		
Understand guidelines for officiating swimmers with disabilities.		
Understand timing adjustments and be able to assist Administrative Official when not on duty as Deck Referee.		
Adjust to unusual or unexpected circumstances.		
Act athlete-centered, giving swimmers who missed their heat with an acceptable excuse the opportunity to swim, if appropriate for session.		
Act diplomatically, professionally and respectfully when interacting with swimmers, coaches, officials, volunteers, spectators and pool personnel.		

A minimum of six (6) mentored sessions must be completed and evaluations submitted to the Advancement Subcommittee Chair of the MA Officials Committee with a rating given in all skills before a Committee Review is made. (May use all evaluations to encompass all skills.)

Is Apprentice recommended for certification?  Yes  No

If No, what specific issues need to be developed or improved?

Evaluator Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Evaluator Signature: \_\_\_\_\_ Phone: \_\_\_\_\_