

Greater Cincinnati Wrestling Officials Association

WRESTLING OFFICIAL OBSERVATION REPORT

Name of Observed Official _____ Date of Match _____

School Location _____ Match Level (circle one) JH FROSH RES VAR

(5 - 0 Scale)

<u>Maximum</u>	<u>Par</u>	<u>Needs Improvement</u>	<u>Poor</u>	<u>Very Poor</u>	<u>Totally Unacceptable</u>
5	4	3	2	1	0

REFEREE'S APPEARANCE

1. _____ Uniform
2. _____ Grooming
3. _____ Physical Condition

PRE-MEET DUTIES

4. _____ Arrive on Time
5. _____ Visit Locker Rooms
6. _____ Legality of Uniforms, Equipment, Hair, Mats
7. _____ Duties of Scorers & Timers

DURING THE MATCH

8. _____ In Position
9. _____ Anticipate Position Changes of Wrestlers
10. _____ Whistle & Visual Signals
11. _____ Use of Appropriate Signals

APPLICATION OF RULES

12. _____ Good Technique
13. _____ Clear
14. _____ Definite & Deliberate
15. _____ Knowledge
16. _____ Consistency
17. _____ Good Judgment

REACTION UNDER PRESSURE

18. _____ In Complete Charge
19. _____ Shrugs off Criticism
20. _____ Enforce Both the Letter & the Spirit of the Rules
- _____ TOTAL SCORE

Printed Name of Observer _____ Permit # _____

Address _____ City _____ ZIP _____

Home Phone Number _____ Work Phone Number _____
(Area Code) (Area Code)

Signature of Observer _____

OBSERVER:

PLEASE SHARE RESULTS WITH OBSERVED OFFICIAL & GIVE HIM/HER THIS FORM.

OBSERVED CLASS 2 OFFICIAL:

Greater Cincinnati Wrestling Officials Association

BRING THIS SHEET TO THE TEST SITE. NOTE:

This Form MUST be received by R. W. Farmer on the Test Date. **NO EXCEPTIONS!**