

# SOUTHERN NEVADA OFFICIALS ASSOCIATION

## Basketball Evaluation Form : SCORER

Date: \_\_\_\_\_ Site: \_\_\_\_\_ Evaluator \_\_\_\_\_

B: \_\_\_\_\_ JV: \_\_\_\_\_ Varsity: \_\_\_\_\_ Scorer: \_\_\_\_\_

Game Evaluation:	YES	NO	Comments:
<b>Score book:</b>			
Entered Home & Visitors teams:			
Entered Officials' names:			
Entered Scorer and Timer names:			
Entered players' names correctly:			
Entered players' numbers numerically:			
Entered starting players correctly:			
<b>Book during game:</b>			
Kept running score correctly:			
Kept players' points correctly:			
Kept team fouls correctly:			
Kept players' fouls correctly:			
Kept time-outs correctly:			
Kept possession arrow correctly:			
Communicated with partner throughout the game:			
<b>End of game:</b>			
Entered total points scored by quarter:			
Score book and scoreboard in agreement:			
Completed player info across the book correctly:			
Summarized total points each quarter:			
2 pt, 3pt. Ft made/Ft attempted:			
Last column and bottom row in agreement:			
<b>General:</b>			
Arrived 20 Minuetes prior to game time:			
Wore SNOA shirt:			
Wore hat/cap, sunglasses, listening ear plugs during the game:			
Used phone/ ipod, etc. during game:			
Communicated positively with officials:			

Strengths:

Needs improvement:

Send by e-mail to frank: froqueni@aol.com

# SOUTHERN NEVADA OFFICIALS ASSOCIATION

## Basketball Evaluation Form : Timer

Date: \_\_\_\_\_ Site: \_\_\_\_\_ Evaluator \_\_\_\_\_

B: \_\_\_\_\_ JV: \_\_\_\_\_ Var: \_\_\_\_\_ Timer: \_\_\_\_\_

Game Evaluation:	YES	NO	Comments:
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**Scoreboard:**

Set starting time per referee:		
Set quarter/half time correctly:		
Set period correctly:		
Entered points correctly:		
Entered player # and foul # correctly:		
Entered team fouls correctly:		
Kept possession arrow correctly:		
Blew horn for substitutes correctly:		
Started clock when ball officially touched:		
Stopped clock when officials whistle blew:		

**At the Table:**

Kept time-outs correctly (stop-watch):	
Communicated with partner throughout the game:	

**Other:**

Arrived prior to game time:	
Wore SNOA Shirt:	
Used phone / ipod, etc. during game:	
Wore hat/cap, sunglasses, listening ear plugs during game:	
Communicated positively with officials:	

Strengths:

Needs Improvement:

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# SOUTHERN NEVADA OFFICIALS ASSOCIATION

## Volleyball Scorer Evaluation Form

Date: \_\_\_\_\_ Site: \_\_\_\_\_ Evaluator: \_\_\_\_\_

B: \_\_\_\_\_ JV: \_\_\_\_\_ Varsity: \_\_\_\_\_ Scorer: \_\_\_\_\_

Game Evaluation:	Yes	No	Comments:
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**Timing:**

Arrived Prior to Coin Toss:			
Started pre-game clock:			
Started and stopped time outs:			
Started between games clock:			

**Scoring:**

Entered line-ups correctly:			
Kept points correctly:			
Kept substitutes correctly:			
Kept time-outs correctly:			

**Other:**

Wore SNOA shirt:			
Used phone / ipod during game:			
Worked closely with Umpire:			

Strengths:

Needs Improvement:

e-mail to Frank at [froqueni@aol.com](mailto:froqueni@aol.com)