



Oklahoma Volleyball Region

Scorer Rating Sheet

To Be Filled Out By Candidate

Date: _____

Name: _____

Club/Team Name: _____

Date of Birth: ____/____/____
MM DD YYYY

eMail: _____

Rating for: ☐ Junior ☐ Adult Provisional ☐ Regional (Must be Prov for 1 yr.)

To Be Filled Out By Rater

Tournament: _____ Location: _____

Division: ☐ Women ☐ Men ☐ Co-ed

Teams: _____

Category: ☐ Junior ☐ Adult

_____ v.s. _____

Level: ☐ Age Group (fill in age) ☐ AA ☐ A ☐ BB ☐ B

____ Observed candidate before, during and after each set

____ If no subs occurred, discussed procedure of recording and handling

____ Score sheets examined and discussed with candidate after match

____ If no 3rd set sheet used, discussed how it differs

Rating Entries: + Above Average ✓ Average - Needs Improvement

Pre-Set Procedures

____ Records heading information before match starts
in all caps (all score sheets)____ Complete OFFICIALS PRINTED NAMES section
before match starts (all score sheets)

____ Records line-ups correctly

____ Enters set number (if applicable)

____ Places 3 Xs in S, R and the receiving team's ☒

____ Confirms line-ups on floor prior to first serve

____ Records set start time

____ Communicates well with referees

During-Set Procedures

____ Checks for correct server - each serve

____ Time Outs recorded and signaled

____ Subs recorded including "Score at Substitution"

____ Understands referee signals

____ Recovers promptly from errors

____ Records sanctions and comments accurately

Post-Set Procedures

____ Records set end time

____ Correctly records set point and circles final exit scores

____ Completes Results section accurately

____ T-Bar unused points

____ Checks then signs each score sheet

____ Confirms R1 signature

Deciding-Set Procedures

____ Records starting line-ups on left and far right

____ Records Substitutions and Time Outs on left and far right

____ Records change of sides properly

Rater's Notes

Rater's Scorer Certification Level:

☐ National ☐ Regional
☐ Provisional

Recommendation:

☐ Certify
☐ Re-evaluateR
A
T
E
R

Print Name _____

Signature _____

Candidate Signature _____

CANDIDATE must send this form to the Region Scorer ChairMail to: Margo Juergens
OkRVA Officials Chair
715 Claremont DR
Norman, OK 73069