



WFTDA Non-Skating Official Performance Evaluation

Penalty Management Family

Penalty Box Manager/Penalty Box Timer/Lineup Tracker

Space for Photo

| Section 1: NSO Information | | | | | | |
|--|--|--------------------------------|--------------------------|--|--|--------------------------|
| Name | | Derby Name | | League Affiliation | | |
| Section 2: Game Information | | | | | | |
| Date of Game | <input type="checkbox"/> WFTDA Regulation Game <input type="checkbox"/> WFTDA Sanctioned Game | Host League | | Position | | |
| Competing Teams (e.g. Gotham Girls All-Stars vs. Windy City Rollers All-Stars) | | | | Head Referee/NSO | | |
| Section 3: Performance Assessment | | | | | | |
| Evaluations may be completed by an Authorized League Representative (one evaluation form per team), the Head Referee and/or Head NSO. | | | | | | |
| Assess the NSO's performance in each of the following areas, using the following rating system [5=Exceptional, 4=Satisfactory, 3=Fair, 2=Needs Work, 1=Unacceptable, NA=Not Applicable] and by providing comments below: | | | | | | |
| | 5 | 4 | 3 | 2 | 1 | NA |
| Penalty Box Manager Only – Quickly and effectively managed timing of jammers. Demonstrated knowledge of jammer timing rules and correctly enforced them. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Penalty Box Manager Only – Effectively managed the functions of the penalty box including penalty box queues, point of no return, and return to the track communications. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Penalty Box Timer Only – Accurately timed the penalties. Communicated to skaters as per WFTDA rules and/or Standard Practices. Fully and accurately completed paperwork. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Lineup Tracker Only – Accurately completed paperwork as required by Standard Practices, Head NSO, or Head Referee. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communication – Clearly and effectively communicated required information as per WFTDA Standard Practices or directions of the Head Referee/Head NSO in the performance of the positional role. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Game Flow – Kept the game going with a minimal amount of issues and officials' timeouts; sorted out issues between jams. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Rules Knowledge/Understanding – Demonstrated a thorough knowledge of the WFTDA rule set as it pertains to the NSO position performed. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Standard Practices Knowledge/Understanding – Demonstrated knowledge and understanding of the WFTDA Standard Practices as they pertain to the NSO position performed. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Game Awareness – Demonstrated ability to multitask without losing focus or making errors, able to anticipate game play actions and respond quickly. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Professionalism – Officiated the game in a calm, diplomatic manner; maintained composure and focus throughout the game. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Positional Knowledge – Was aware of the role of the position and able to function to a high level without additional training or feedback before or during the game. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Overall – Accurately, consistently, fairly, and professionally performed the duties of the position. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments | | | | | Rinxter Used? | |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Evaluator's Name | | Evaluator's League Affiliation | | Authorized League Rep? | | |
| | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Evaluator's Contact Information (e-mail or phone #) | | Evaluator's Signature | | | | |
| | | | | | | |

Fill out this form to the best of your ability, sign it and return it to NSOCert@wftda.com

Requested file format to save for electronic submission is:

OfficialsName-AbbreviatedPosition-GameType(Sanc or Reg)-Date-of-game (in YYYY-MM-DD format).pdf (e.g. Intejill-PW-Sanc-2014-12-21.pdf)