

# CAROLINA REGION JUNIOR REGIONAL SCORER CERTIFICATION FORM

**NOTE: Rater must hold a Regional 2 or higher certification to Qualify**

Player Name (print) \_\_\_\_\_

Team Name & Age \_\_\_\_\_ Club \_\_\_\_\_

## SCORER OBSERVATION AND VERIFICATION

As a registered USA Volleyball official with a Regional 2 or higher certification, I verify with my signature below that the above named junior player kept score on the match listed. I certify that the player exhibited all the qualities outlined below during the match and was knowledgeable in scorekeeping procedures and should be qualified to become a Jr. Regional Scorer in the Carolina Region.

<u>Match 1</u>	<u>Check</u>
Filled in heading information	_____
3 X's serve, receive & service box	_____
Line-ups entered correctly	_____
Exit scores recorded	_____
Substitutions slashed & score entered	_____
Points slashed/triangle in running score	_____
Last points correct	_____
Points circled	_____
Set/Match Beginning/End times entered	_____
Winning & losing team entered correctly	_____
Score sheet signed	_____

<u>Match 2</u>	<u>Check</u>
Filled in heading information	_____
3 X's serve, receive & service box	_____
Line-ups entered correctly	_____
Exit scores recorded	_____
Substitutions slashed & score entered	_____
Points slashed/triangle in running score	_____
Last points correct	_____
Points circled	_____
Set/Match Beginning/End times entered	_____
Winning & losing team entered correctly	_____
Score sheet signed	_____

### **Match 1:**

Tournament: \_\_\_\_\_ Date: \_\_\_\_\_

Officials Name (print) \_\_\_\_\_ Signature: \_\_\_\_\_

Officials Rating: \_\_\_\_\_ Region: \_\_\_\_\_

### **Match 2:**

Tournament: \_\_\_\_\_ Date: \_\_\_\_\_

Officials Name (print) \_\_\_\_\_ Signature: \_\_\_\_\_

Officials Rating: \_\_\_\_\_ Region: \_\_\_\_\_