## **Request for Evaluation**

To: Meet Referee Qualifying Meet: Meet Location:	Winter Age Group Championship Meet , Meet Dates: Dec. 1-3, 2023  Moraga, CA LSC: PC
Mail to: Mike Davis,11	15 Valbusa Dr., Gilroy, CA 95020-7455 or e-mail: mekidadad1@yahoo.com
Please consider i	me for assignments at the above meet so that I may be evaluated as follows:
Name:	LSC:, USA S Reg #
email:	Phone:
Mailing Address:	
Current Certificat	Chief Judge:
	Deck Referee:
For Re-certification For Advancement For Final Evaluatio  Recent Evaluatio  1. For Re-certification 2. For Advancement to 3. For Final Evaluation	towards N2 or N3 -   S&T,   CJ,   Starter,   Ref,   Ad Ref (choose up to 2)  on as N3 -   CJ*,   Starter*,   Ref*,   Ad Ref* (choose 1, if eligible.)  on as N3 -   Ref*,   Ad Ref* (choose 1, if eligible.)  on as N3 -   S&T,   CJ,   Starter,   Ref,   Ad Ref (choose all applicable)  owards N2 or N3 -   S&T,   CJ,   Starter,   Ref,   Ad Ref (choose all applicable)
	sorry, cannot be accommodated.  Too many requests. Please apply again. You are not yet eligible. Please work on it.  can be accommodated as follows:  on at N2 or N3 as - S&T, CJ, Starter, Ref, Ad Ref  int towards N2 or N3 - S&T, CJ, Starter, Ref, Ad Ref  tion as N3 - CJ*, Starter*, Ref*, Ad Ref*  Meet Referee.
Date:	"Confirmation"/"Sorry" to applicant. Send a copy of accepted applications to Evaluators.

