Caddo Parish Public Schools Athletic Department

FOOTBALL OFFICIAL RATING FORM

Home Team ___________________________________________________  Score ______________________

Visiting Team ___________________________________________________  Score ______________________

Date of Game ______________________________

Officials Name  Please check one

Ref. ________________________________  Good ______  Average ______  Poor ______

Ump. ________________________________  ______  ______  ______

H.L. ________________________________  ______  ______  ______

L.J. ________________________________  ______  ______  ______

B.J. ________________________________  ______  ______  ______

F.J. ________________________________  ______  ______  ______

S.J. ________________________________  ______  ______  ______

G.C. ________________________________  ______  ______  ______

P.C. ________________________________  ______  ______  ______

Rate the categories listed below with an (S) for Satisfactory or a (U) for Unsatisfactory

Arrival prior to the game ______  Proper Uniform ______  Appearance ______

Official courteous & Businesslike ______  Signals clearly given ______  Did the crew hustle? ______

Did the crew keep the game under control ______  Notified prior to the second half ______

Did the crew leave the field immediately after the game? ______  Play coverage ______

Penalty options explained satisfactorily ______  Mechanic signals clearly given ______

Would you recommend this crew as a Play-Off Crew?  Yes ______  No ______

Please type or print the following names in the appropriate spaces and sign if you are mailing the form.

COACH: __________________________________________  SCHOOL: ______________________

PRINCIPAL: __________________________________________

Please send a copy to the Caddo Parish Public Schools Athletic Department – ATTENTION: Anthony Tisdale, Supervisor
Or if you wish you may e-mail a copy to agtisdale@caddo.k12.la.us