

# Event Referee Log sheet



Name: \_\_\_\_\_ Club: \_\_\_\_\_ Club Code: \_\_\_\_\_  
 Address: \_\_\_\_\_ Town: \_\_\_\_\_ Post Code: \_\_\_\_\_  
 State: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 DOB: \_\_\_\_\_  
 Date of Course: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Course No: \_\_\_\_\_ Member No: \_\_\_\_\_ Technical ID No : \_\_\_\_\_

To apply for accreditation in this position you must be assessed as competent in each of the activities listed below. Assessment must be done a) 3 times for each activity b) by a different supervisor for each of the three times and c) only after attending the formal course  
 The supervisor must be an accredited Referee and must mark each box with one of the following  
 C= Competent R= Review N/A= not applicable

Event Referee	Performance Mark each box C, R or N/A	Performance Mark each box C, R or N/A	Performance Mark each box C, R or N/A	Performance Mark each box C, R or N/A	Performance Mark each box C, R or N/A
Reported to Meet Referee for allocation of duties, briefing and copy of program					
Checked if deck or heat seeding					
Obtained and studied copy of MD's					
Checked all officials in place					
Liaised effectively with Starter/Marshal/Chief Timekeeper					
Facilitated smooth conduct of the meet					
Checked rules were being observed by Starter, JOS and IOT and Infringement reports completed correctly					
Ruled correctly on disqualifications					
Advised swimmers of disqualification (optional)					
Resolved any conflicts amicably (OR COMPLETED EXERCISE)					
Date:					
Type of Meet:					
Supervisor's Signature:					
Print Supervisor's Name: <b>Must be accredited referee</b>					

PLEASE USE BALLPOINT PEN