

NCBOA OFFICIAL EVALUATION FORM

Official's Name: _____ Observer: _____ Date: _____

Partner 1: _____ Home Team: _____ Visitor: _____

Partner 2: _____ Level of Teams: _____ Quarters Observed: _____

Game Site: _____ Intensity of Game (circle one): Low Med High

	1	2	3	4	5	NA	
1. Pre-Game Activities							Notes
2. Professional Appearance							
3. Use of Voice							
4. Whistle							
5. Partner Communication							
6. Court Demeanor							
7. Mobility							
8. Signals							
9. Lead Positioning							
10. Trail Positioning							
11. Center Positioning							
12. Press Coverage							
13. Game Situation Awareness							
14. Judgment							
15. Advantage/Disadvantage							
16. Consistency							
17. Off-Ball Play							
18. Control of Players/Coaches							
19. Rules Application							
20. Points of Emphasis							

General Comments:

Note: 1-needs significant improvement, 2-below average, 3-average, 4-above average, 5-roll model, NA-not applicable