



# ISI Platinum Freestyle Test Sheet

Skater Name \_\_\_\_\_ ISI # \_\_\_\_\_

Skater Age \_\_\_\_\_ Home Rink \_\_\_\_\_

Test Date \_\_\_\_\_ Test Location \_\_\_\_\_

Judge Signature \_\_\_\_\_ Prof. # \_\_\_\_\_

## **COMPULSORY MANEUVERS:**

(Scoring 1 to 10)

**1st Attempt**

**2nd Attempt**

Choice Jump #1	_____	_____
Choice Jump #2	_____	_____
Jump Combination #1 (2 jumps)	_____	_____
Jump Combination #2 (2 jumps)	_____	_____
Choice Spin #1	_____	_____
Choice Spin #2	_____	_____
Spin Combination	_____	_____
Dance Step Sequence	_____	_____

## **SOLO PROGRAM:**

Choice Jump #1	_____
Choice Jump #2	_____
Jump Combination (2 jumps)	_____
Choice Spin #1	_____
Choice Spin #2	_____
Spin Combination	_____
Dance Step Sequence	_____

**(Scoring 1-10)**

Posture \_\_\_\_\_ Content \_\_\_\_\_ Correctness \_\_\_\_\_ Pattern \_\_\_\_\_

Rhythm \_\_\_\_\_ Duration \_\_\_\_\_ Interpretation \_\_\_\_\_  
(4 min.)

**TEST RESULT:**    **PASS** \_\_\_\_\_    **INCOMPLETE** \_\_\_\_\_

## **Notes:**

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