

EXAMINER'S REPORT FORM

Ice Skating Institute

_____ Date of Test

Name of Skater

Age

Registration Number

Address

Prerequisite Test is Figure Skating 2 - passed (date): _____

JUDGING CRITERIA

FIGURES

Grade each applicable item from 0 to 10 for each figure.

R.B.I.-
L.B.I. 8

R.F.O.- -
L.B.I. 3

L.F.O.-
R.B.I. 3

R.F.I.-
L.B.O. 3

L.F.I.-
R.B.O. 3

1. Size of Circles and Loops

2. Circle Shape

3. Centers

4. Alignment of Circles

5. Line Up of Turns

XXX

6. Cleanliness of Turns and Edges

7. Facing of Turns

XXX

8. Shape of Turns

XXX

9. Form and Posture

10. Flow

Score

Rating (if any)_____

Final Score

Name and Address of Rink

Name of Instructor

Signature of Examiner