



COMPETITORS' EVALUATION OF ADS JUDGES, TECHNICAL DELEGATES, AND ORGANIZERS
(TO BE CONSIDERED ONLY IF COMPLETED BY ADS MEMBERS)



COMPETITION NAME: _____ **DATE:** _____

This form is provided to give ADS members an opportunity to evaluate the ability of ADS licensed officials and show organizers. The ADS hopes that members will take the time to report on both positive and negative issues. *These evaluations are confidential and may be used by the ADS to investigate any incident which warrants further study.*

Please complete one form per official/organizer. If necessary, ask the organizer for more forms, or download them from the ADS website.

Please rank on a scale of 1-10. 10 = Excellent; 9 = Very Good; 8 = Good; 7 = Fairly Good; 6 = Satisfactory; 5 = Marginal; 4 = Insufficient; 3 = Fairly Bad; 2 = Bad; 1 = Very Bad. If giving a score of 6 or lower, please provide an explanation below or on the back of this form.

EVALUATION OF JUDGE

Name of Judge: _____

Proficiency at judging classes _____
Diplomacy when offering criticism _____
Willingness to answer questions _____
Conduct with competitors _____
Impartiality _____
Preparedness _____
Ability to assess safety problems _____
Ability to assess soundness _____
Consistency in scoring (dressage) _____
Appropriateness of remarks _____
Understanding of class specifications/levels _____
Would you show before this judge again? ☒ Yes ☐ No

Further comments

EVALUATION OF TECHNICAL DELEGATE

Name of Technical Delegate: _____

Knowledge of rules _____
Ability to handle problems _____
Willingness to answer questions _____
Conduct with competitors _____
Impartiality _____
Preparedness _____
Ability to recognize safety problems _____
Ability to assess appropriateness of course
for levels offered _____
Further comments

NAME OF ADS MEMBER:

EVALUATION OF ORGANIZER

Name of Organizer: _____

Stabling _____
Sound System _____
Secretary's Office _____
Conduct with competitors _____
Rings and courses _____
Other facilities (portable toilets, catering, etc.) _____
Sensitivity to safety and fairness _____
Ability to handle problems _____
Social activities _____

Did the competition start and run on time? ☒ Yes ☐ No

Would you attend this competition again? ☒ Yes ☐ No

Further comments

ADS Membership Number: _____

Address: _____

At this competition I was a:

☐ Owner ☐ Driver ☐ Groom

☐ Spectator ☐ Other

Signature: _____

(must be signed to be considered)

Please return **within 10 days of competition to:**

AMERICAN DRIVING SOCIETY

PO Box 278

Cross Plains, WI 53528

info@americandrivingsociety.org