



Athlete \_\_\_\_\_

Date \_\_\_\_\_

✓ Good    ○ Needs Attention

<b>ROLLS</b>	<p>Grip Pattern Plane Direction</p> <p>Coordination / Timing Smoothness Control Tracking / Rolling Action</p>	<p><input type="checkbox"/> Exceeds Expectations <input type="checkbox"/> Meets Expectations <input type="checkbox"/> Developing <input type="checkbox"/> Not Yet</p>
<b>CONNECTING MATERIAL</b>	<p>Grip Pattern Plane Direction</p> <p>Coordination / Timing Smoothness Control</p>	<p><input type="checkbox"/> Exceeds Expectations <input type="checkbox"/> Meets Expectations <input type="checkbox"/> Developing <input type="checkbox"/> Not Yet</p>
<b>BODY WORK</b>	<p>Clarity Control Posture Alignment</p> <p>Body Lines Flexibility Strength Balance</p>	<p><input type="checkbox"/> Exceeds Expectations <input type="checkbox"/> Meets Expectations <input type="checkbox"/> Developing <input type="checkbox"/> Not Yet</p>
<b>PERFORMANCE</b>	<p>Confidence Start / End Position Professionalism</p> <p>Appearance Consistency Proficiency</p>	<p><input type="checkbox"/> Exceeds Expectations <input type="checkbox"/> Meets Expectations <input type="checkbox"/> Developing <input type="checkbox"/> Not Yet</p>

**Overall Comments**

Drops									
Breaks/Slips									
Off Pattern									
Loss of Balance									
Retry Element									

Final Grade

\_\_\_\_\_  
**Adjudicator**