

# NAVHDA APPRENTICE JUDGE EVALUATION

(One report is required for each testing day)

Include this sheet  
with the  
Sr. Judge Packet

Test Date: \_\_\_\_\_  
MM/DD/YYYY

Host Chapter: \_\_\_\_\_

Apprentice Name: \_\_\_\_\_

Member Number: \_\_\_\_\_

Sr. Judge: \_\_\_\_\_

Signature: \_\_\_\_\_

Judge: \_\_\_\_\_

Signature: \_\_\_\_\_

Judge: \_\_\_\_\_

Signature: \_\_\_\_\_

Evaluate Apprentice Judge as follows (check one box for each line)

	Excellent	Good	Fair	Poor	Comments
Cooperation within judging team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Stamina	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Demeanor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Dress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Evaluate Apprentice Judge as follows (circle one number for each line):

Understanding Of NAVHDA Rules	10	9	8	7	6	5	4	3	2	1
Ability To Apply NAVHDA Rules	10	9	8	7	6	5	4	3	2	1
Ability To "Read" A Dog	10	9	8	7	6	5	4	3	2	1
Communication Skills	10	9	8	7	6	5	4	3	2	1
Handling Of Handlers	10	9	8	7	6	5	4	3	2	1
Use Of Score Cards	10	9	8	7	6	5	4	3	2	1
<b>Rate This Apprentice</b> (circle one):	10	9	8	7	6	5	4	3	2	1

**If you're recommending this Apprentice be approved, give details why.**

**IMPORTANT**  
**Please comment on all Apprentices progress on the back of this form.**

How would you rate the degree of difficulty in evaluating these dogs? Easy \_\_\_\_\_ Average \_\_\_\_\_ Difficult \_\_\_\_\_

How many dogs were tested in each of the following tests? NA \_\_\_\_\_ UPT \_\_\_\_\_ UT \_\_\_\_\_

The test report has been discussed with the apprentice. The apprentice is aware of his/her responsibility to write a report about the test and submit the report to NAVHDA office in a timely manner.

Apprentice Signature \_\_\_\_\_ Date: \_\_\_\_\_

The apprentice will receive a copy of this report at the E-mail address below.

Apprentice E-mail \_\_\_\_\_

Phone 847-253-6488

Fax 847-255-5987

Email [navoffice@navhda.org](mailto:navoffice@navhda.org)