

TOURNAMENT (INCLUDE DIVISION & CLASSIFICATION OF PLAY)

TOURNAMENT DIRECTOR EVALUATION

DATES

Please complete the evaluation based on your experience as a Tournament Director working with the USA Softball Representative, UIC and the National Office.

| lease check the appropriate numbers below: (5) Excellent, (f you rate a 1 or 2 in any category, please list reasons why ir | | rage, (2) Poor, (1) | Unacceptable. | | |
|--------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------|---------------|---|---|
| SA SOFTBALL REPRESENTATIVE: | i dominioned. | | | | |
| Visible at all times during tournament play | 5 | 4 | 3 | 2 | 1 |
|) Knowledge of the USA Softball Code & bracket | 5 | 4 | 3 | 2 | 1 |
| Cooperation with USA Softball Representative | 5 | 4 | 3 | 2 | 1 |
| MPIRE-IN-CHIEF: | | | | | |
|) Visible at all times during tournament play | 5 | 4 | 3 | 2 | 1 |
|) Knowledge oF USA Softball Rules | 5 | 4 | 3 | 2 | 1 |
| Cooperation with UIC | 5 | 4 | 3 | 2 | 1 |
| IATIONAL OFFICE: | | | | | |
| Available to assist with tournament request | 5 | 4 | 3 | 2 | 1 |
|) Quality of resources offered (website, disk) | 5 | 4 | 3 | 2 | 1 |
| Received materials in a timely manner | 5 | 4 | 3 | 2 | 1 |
| D) Communication with Commissioner | 5 | 4 | 3 | 2 | 1 |

COMMENTS

TOURNAMENT DIRECTOR