



OFFICIALS PROGRAM

STEWARD PERFORMANCE EVALUATION REPORT

PROMOTION TO SENIOR GENERAL OR JUMPING STEWARD

Name of Steward Applicant: _____ EC Number: _____

Name of Evaluator:
(Sr. or Sr. National Steward) _____

Competition Name:		Competition Date:	
Number of competition days observed:		<input type="checkbox"/> Under 50 horses <input type="checkbox"/> 50 – 150 horses <input type="checkbox"/> Over 150 horses	
Stabling on site? <input type="checkbox"/> Yes <input type="checkbox"/> No		Size of competition:	
Reviewed Prize List and Entry Form Approval? <input type="checkbox"/> Yes <input type="checkbox"/> No		Review of Jumps Checklist completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
EMC Technician on site for equine medication control testing? <input type="checkbox"/> Yes <input type="checkbox"/> No		Stabling Walk Through Checklist completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Concussion or accident protocols applied? <input type="checkbox"/> Yes <input type="checkbox"/> No		Reviewed Pony Measurement? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Instructions for Completing the Performance Evaluation

All categories must be filled, either with a score from the Rating Scale or “Not Observed”.
Comments are required for all 1 and 2 ratings.

Initials	No.	Category	Rating Scale					Not Observed
			1	2	3	4	5	
	1	Preparation and Organization	1	2	3	4	5	Not Observed
	2	Rules: Knowledge & Application	1	2	3	4	5	Not Observed
	3	Communication and Interpersonal Skills	1	2	3	4	5	Not Observed



Initials	No.	Category	Rating Scale					Not Observed
	4	Electronic Communications/Use of Radio and Technology	1	2	3	4	5	Not Observed
	5	Observation Skills	1	2	3	4	5	Not Observed
	6	Self-Initiated Activity	1	2	3	4	5	Not Observed
	7	Problem Solving & Decision Making	1	2	3	4	5	Not Observed
	8	Ethics – Confidentiality & Discretion	1	2	3	4	5	Not Observed
	9	Attitude: Acceptance of Feedback	1	2	3	4	5	Not Observed



Initials	No.	Category	Rating Scale					Not Observed
	10	Appearance	1	2	3	4	5	Not Observed

Comments (if additional space required):

Evaluator recommends promotion: <input type="checkbox"/> Yes <input type="checkbox"/> No

Signature of Applicant: _____ Date: _____

Signature of Evaluator: _____ Date: _____

A copy of this evaluation, along with any completed Stabling Walk Through and Review of Jumps Checklists, must be sent to Equestrian Canada by the evaluating steward.

Equestrian Canada
 Officials Program
 c/o House of Sport, 2451 Riverside Drive, Ottawa ON K1H 7X7
 Tel: (613) 287-1515, Fax: (613) 248-3484,
 E-mail: officials@equestrian.ca