



THE INTERNATIONAL CAT ASSOCIATION, INC.

SOLO EVALUATION FORM



MARYLOU ANDERSON, JUDGING ADMINISTRATOR
3509 CLIFF VIEW LOOP
WEATHERFORD, TX 76087
(817) 613-0070

Two copies of this form are to be furnished to the Instructor by the trainee, along with a stamped self-addressed envelope. The instructor shall mail the completed forms to the trainee no later than 7 days after the close of the show. The trainee is responsible for mailing the forms to the Judging Administrator with the Monthly Report and to the Allbreed Sponsor immediately upon receipt from the instructor.

TO BE FILLED OUT BY THE TRAINEE:

NAME OF TRAINEE: _____ TRAINEE'S ALLBREED SPONSOR: _____

ADDRESS: _____

CITY: _____ STATE/COUNTRY: _____ ZIP CODE: _____

NAME OF CLUB: _____ LOCATION: _____ DATE: _____

SOLO SESSION #: _____ INSTRUCTOR: _____ OUT OF REGION: YES NO

WORKED WITH:

CHAMPIONSHIP: KITTENS CATS ALTERS **HOUSEHOLD PETS:** CATS ADULTS

List the breeds worked with and approximate number of cats in each breed: _____

THE INSTRUCTOR IS TO WRITE DETAILED COMMENTS ON THE FOLLOWING: (USE EXTRA SHEETS IF NECESSARY)

I. Ability and appropriateness of handling: _____

II. Knowledge of and application of breed standards: _____

III. Record Keeping (Marking book, etc.): _____

V. Attitude? _____

VI. Appearance/Dress? _____

VII. Rapport with the Audience? _____

VIII. Presentation of Finals? _____

IX. Number of Cats/Hour Judged? _____

Instructors Comments: *Please comment on the Trainee's overall performance and potential.* _____

Do you feel the trainee is ready for advancement to Probationary Specialty? _____

INSTRUCTOR: (PRINT NAME HERE) _____

INSTRUCTOR SIGNATURE: _____ **DATE:** _____