



4441 Six Forks Road, Suite 106-167 Raleigh, NC 27609

Learner Steward Evaluation form: To be filled out and returned to the NCHJA Office by the Official with whom the applicant has learner Stewarded.

Name of Applicant and NCHJA #:

Please Answer yes or no. If no explain briefly.

In my opinion, the Steward applicant has the ability to represent the NCHJA in a professional manner.

In my opinion, the Steward applicant is knowledgeable of the rules of the NCHJA.

In my opinion, the Steward applicant is capable of making unbiased and educated decisions.

In my opinion, the Steward applicant has the experience needed to be granted a judges card by the NCHJA.

In my opinion, the Steward applicant has the knowledge and background needed to be granted a Steward's card by the NCHJA.

Signed and dated:

NCHJA #/and or USEF #: