



THE INTERNATIONAL CAT ASSOCIATION, INC.

TRAINEE EVALUATION FORM



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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: _____

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

WORKED WITH:

CHAMPIONSHIP: KITTENS CATS ALTERS **HOUSEHOLD PETS:** CATS ADULTS PNB ANB NT

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. Comment on the appropriateness of handling for type/breed; assurance and comfort in handling; handling routine; ease in handling cats to/from cage; checking for chipped claws, testicles, etc. _____

Handling suggestions/tips for trainee: _____

II. Comment in detail on knowledge of breed and application of breed standards to the cats. _____

Indicate breeds needing extra work: _____

III. Knowledge of mechanics: _____

IV. Other: _____

Appearance/Dress? _____

Attitude? _____

Handles constructive criticism? _____

Knowledge/application of show rules? _____

V. List trainee's strengths: _____

VI. List 3 things trainee needs to work on: _____

INSTRUCTOR: (PRINT NAME HERE) _____

INSTRUCTOR SIGNATURE: _____ **DATE:** _____