Phone: (08) 8984 3570 Email: info@dogsnt.com.au Web: www.dogsnt.com.au



PO Box 37521 WINNELLIE NT 0821

North Australian Canine Association Inc - Member Body of the Australian National Kennel Council

ASSESSMENT FORM: SWEEPSTAKES

ASSESSORS SECTION:					
NAME OF TRAINEE:			DATE:	/	/ 20
CLUB:	GROUP/BREED:				
As an assessor, you are asked	to comply with the fol	lowing:			
 (1) Introduce yourself to the T (2) Both sign the "Declaration (3) Assess the Trainee judging (4) Where you consider the Trained completion of judging (5) At the completion of judging vicinity of the ring, and away to the sign of the ring of	of Confidentiality". for breeds within thei rainee is making handli ng, make sure when yo	ng errors, you may ad ou are talking to the Tr			within the
Please place your comments (which do not have to b	oe discussed with Train	nee) in the	space	provided
DRESS:					
RINGCRAFT:					
ATTITUDE/DEMEANOUR:					
DECISIONS/TIMING:					
BREED KNOWLEDGE:					
GENERAL COMMENTS/RECOI	MMENDATIONS:				

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TRAINEE SECTION:

To be completed by Trainee Judge, in writing, on the day of the Show, and before leaving the ring. No discussion with Assessor, or reference to Catalogue or Breed Standards is to be made. All eligible exhibits (within the trainee's group) are to be critiqued. The aim of this section is to assist the Trainee in preparing for evaluation. We hope this will increase confidence and assist them with their 'Hands-on' examination.

Dog 1 - Breed:		
Dog 2 - Breed:		
Dog 3 - Breed:		
Declaration of Confidentiality of the trainess	alva avvil a al a a tha a tha is a va a	
Declaration of Confidentiality: I, the trainee a and all discussions which take place between		
There will be no further discussion with any of		essor(s) is confidential.
There will be no further discussion with any of	ther trainee or assessor.	
	Signature of Trainee	Date / 20
	o.o. atare of framee	
	Signature of assessor	Date / 20
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The completed form to be forward by the Assessor to the JTS Co-ordinator.