

Potomac Valley Swimming Electronic Timing System Operator Evaluation Form

Apprentice _____

Evaluator _____

Meet _____

Location _____

Session _____

Date _____

KEY: **NO** – Not Observed **NW** – Needs Work **G** – Good **VG** – Very Good

Pre-Meet Tasks

	<u>NO</u>	<u>NW</u>	<u>G</u>	<u>VG</u>
1. Can set the CTS unit for best view of the finishes (first session of a meet)	[]	[]	[]	[]
2. Connects the following cables correctly (first session) or checks them in later sessions: Power cable, A Cable, B cable Scoreboard cable, Hy-tek cable, Printer cable	[]	[]	[]	[]
3. Makes sure printer is set up, and properly configured to the ETS. Tests the printer and loads the paper tray Can set the type size to show all lanes on printouts	[]	[]	[]	[]
4. Reviews and corrects setups for session (Depending on the meet especially one with relay events understands the pad arming delays and how to manage them)	[]	[]	[]	[]
5. Prepares setups report for referee (CTS-5) or asks referee if she/he would like to review the setups (CTS-6)	[]	[]	[]	[]
6. Obtains Hy-Tek down load for session (If Hy-Tek download not obtained then program the events into the CTS for the session)	[]	[]	[]	[]
7. If possible, the ETS operator tests the timing system while the referee and starter are in their meetings. Otherwise, works with starter for a timing system check before start of session	[]	[]	[]	[]
8. Changes non-working pads and/or buttons as appropriate during the system check out before informing the referee the system is ready to record times from each lane	[]	[]	[]	[]
9. If timing system does not pass initial check out can perform basic trouble-shooting. Knows how to use the CTS Tester to test pads, buttons, & harness.	[]	[]	[]	[]

During the Session

10. For the first heat of an event ensures the ETS is on the correct event and heat number and the distance is correct	[]	[]	[]	[]
11. Records race number for each heat on heat sheet	[]	[]	[]	[]
12. If no start from starting system, performs a manual start and informs deck referee and Hy-Tek operator	[]	[]	[]	[]
13. Records all open lanes on heat sheet	[]	[]	[]	[]
14. Turns off open lanes on CTS and scoreboard	[]	[]	[]	[]
15. Enters record times as appropriate (if scoreboard supports record times)	[]	[]	[]	[]
16. Pays close attention to touches in all heats. For distance events informs starter of approaching bell lap, if requested	[]	[]	[]	[]

**Potomac Valley Swimming
Electronic Timing System Operator Evaluation Form**

17. Handles "Store Print," "Reset," and "Next Heat/Event" correctly. [] [] [] []
18. For relay events keeps track of swimmers exiting pool late and makes corrections to lengths actually swum adding or subtracting touches as necessary [] [] [] []
19. Monitors pad and button times and informs referee if there is any electronic timing system malfunction. Also works with head timer to determine if missed buttons are due to timer error or equipment malfunction. [] [] [] []
20. In case of missed touches performs "+ Touches" or "Finish Arm" and can retrieve the correct time from the raw time data [] [] [] []
21. Ensures each heat is finished (all lanes finished, clock has stopped). If not, get deck crew to make last pad touch before storing race (CTS-5). [] [] [] []
22. Informs Hy-Tek operator of any changes to sequence of race numbers or when the race has the incorrect event and/or heat. [] [] [] []

After the Session

23. Works with Hy-Tek operator to be sure all races have been successfully pulled over and all race results have been printed [] [] [] []
24. Turns off CTS-5 (critical for a preliminary session if final are run later) [] [] [] []

Other

25. Can adequately explain or demonstrate the procedures for those tasks (listed above) that were not observed Yes ____ No ____
26. Is this person recommended for ETS certification?
(A NO answer must include a comment on what skills need improvement) Yes ____ No ____

27. Comments (attach an additional page if necessary)

I acknowledge that I have received this evaluation and it has been discussed with me.

Apprentice's signature: _____ Date: _____

Evaluator's signature: _____ Date: _____

This form must be submitted to the PVS Certification Officer