



## Couple 2 Test Form

Skater Name \_\_\_\_\_ ISI # \_\_\_\_\_

Skater Age \_\_\_\_\_ Home Rink \_\_\_\_\_

Date Tested \_\_\_\_\_ Location \_\_\_\_\_

Judge's Signature \_\_\_\_\_ Prof # \_\_\_\_\_

### Compulsory Maneuvers: (Scoring 1 to 10)

	1st Attempt	2nd Attempt
Forward Crossovers	_____	_____
Backward Crossovers	_____	_____
Arabesques	_____	_____
Side by side 1/2 Lutz Jumps	_____	_____
One foot Spins	_____	_____
Dance Step Sequence	_____	_____

### Program (Time 1.5 Min)

Forward Crossovers	_____
Backward Crossovers	_____
Arabesques	_____
Side by side 1/2 Lutz Jumps	_____
One foot Spins	_____
Dance Step Sequence	_____

### Scoring 1-10

Posture \_\_\_\_\_ Content \_\_\_\_\_ Correctness \_\_\_\_\_ Pattern \_\_\_\_\_

Rhythm \_\_\_\_\_ Duration \_\_\_\_\_ Interpretation \_\_\_\_\_ Unison \_\_\_\_\_

Test Results: Pass \_\_\_\_\_ Incomplete \_\_\_\_\_

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_