



Dance 1 Test Form

Skater Name _____ ISI # _____

Skater Age _____ Home Rink _____

Date Tested _____ Location _____

Judge's Signature _____ Prof # _____

Scoring (1-10)

FORWARD CHASSES

FORWARD PROGRESSIVES

Posture _____

Position _____

Correctness _____

Unison _____

Timing _____

Test Results: Pass _____ Incomplete _____

Notes _____

ISI * 6000 Custer Road, Bldg 9 * Plano, Texas 75023
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