



## Polk County APA Pool Leagues Skill Level Evaluation Request



From \_\_\_\_\_ Team # (all five digits!) \_\_\_\_\_

Please evaluate the below listed player's APA skill level:

Name \_\_\_\_\_ Current skill level \_\_\_\_\_

Plays on team \_\_\_\_\_ Team # (all five digits!) \_\_\_\_\_

I hereby request a review of the above referenced player's skill level for the reasons listed below.

Specific details must be listed for the request to be useful. Do not take offense if a player's skill level is not immediately changed, but be assured that your request will be considered and the player's skill level will be reviewed. We appreciate your input.

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Based on the above information, I feel the player's skill level should be: \_\_\_\_\_

Submitted by \_\_\_\_\_ Date: \_\_\_\_\_

This form must be signed, dated, and returned with your weekly scoresheet.

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Your request to have \_\_\_\_\_ skill level evaluated has been received and we are in the process of evaluating the player's skill level. Thank you for your input.

Please be aware that anyone can have a good day or make some good shots; however, we realize that some people do not achieve their correct skill level in a timely manner and some people try to manipulate their skill level. Player's input is an essential tool in minimizing manipulation (sandbagging) of the Equalizer and we appreciate your taking the time to fill out this form.

League Management \_\_\_\_\_ Date Received \_\_\_\_\_ Team # \_\_\_\_\_