NCAA VIDEO REVIEW FORM

Name of Institution: _____

Event: _____ **Competitor's #:** _____

Signature of Head Coach: _____

☐ **Special Requirement: Describe the special requirement in question:**

_____

☐ **UTL: Describe the up to level deduction in question:**

_____

☐ **Neutral Deduction (Out of bounds, Over/Under Time on BB and FX): Describe the neutral deduction in question:**

_____

☐ **Individual Skill: Describe the individual skill in question:**

_____

☐ **Connection or Combination: Describe the connection or combination in question:**

_____

Additional Comments:

_____

Judges Response:

Head Judge: _____ **Signature:** _____
Print Name

2nd Judge: _____ **Signature:** _____
Print Name

Meet Referee: _____ **Signature:** _____
Print Name

Score Adjusted to: _____