



Skate Canada Skills Assessment STAR 9

Date: DD / MM / YYYY Candidate: _____ SC # _____

Home Club/Skating School: _____ Assessor: _____

Evaluation Result: **Pass with Honours** ☐ **Pass** ☐ **Retry** ☐

STAR 9 Skills

Date: DD / MM / YYYY Candidate: _____ Assessor: _____

MANDATORY REQUIREMENTS - Must be Yes for element to receive an overall rating of Silver or better.		
Turns (2/2 or 3/4 where applicable): Meets definition of turn, minimum two second entry and exit edge. Loops demonstrate an entry and exit edge of approximately one second.	Field Moves: Meets the definition of the element.	Skills Exercise: Meets the definition of the element including the prescribed steps. Stable throughout (no fall).

ELEMENT		CRITERIA	RATING			OVERALL	COMMENTS
			BRONZE	SILVER	GOLD		
Forward Loop change Loop	Mandatory Requirements: Yes: <input type="checkbox"/> No: <input type="checkbox"/>	Accuracy*				G <input type="checkbox"/>	RFO <input type="checkbox"/> LFO <input type="checkbox"/> RFI <input type="checkbox"/> LFI <input type="checkbox"/>
		Carriage/Clarity				S <input type="checkbox"/>	
		Edge Quality				B <input type="checkbox"/>	
Backward Loop change Loop	Mandatory Requirements: Yes: <input type="checkbox"/> No: <input type="checkbox"/>	Accuracy*				G <input type="checkbox"/>	RBO <input type="checkbox"/> LBO <input type="checkbox"/> RBI <input type="checkbox"/> LBI <input type="checkbox"/>
		Carriage/Clarity				S <input type="checkbox"/>	
		Edge Quality				B <input type="checkbox"/>	
360 Degree Spiral Challenge	Mandatory Requirements: Yes: <input type="checkbox"/> No: <input type="checkbox"/>	Position*				G <input type="checkbox"/>	
		Carriage/Clarity				S <input type="checkbox"/>	
		Edge Quality				B <input type="checkbox"/>	
STAR 9 Skills Exercise 1 Rockers	Mandatory Requirements: Yes: <input type="checkbox"/> No: <input type="checkbox"/>	Power*				G <input type="checkbox"/>	
		Accuracy				S <input type="checkbox"/>	
		Carriage/Clarity				B <input type="checkbox"/>	
STAR 9 Skills Exercise 2 S Steps	Mandatory Requirements: Yes: <input type="checkbox"/> No: <input type="checkbox"/>	Power*				G <input type="checkbox"/>	
		Accuracy				S <input type="checkbox"/>	
		Carriage/Clarity				B <input type="checkbox"/>	

2 re-skates permitted (must be different elements)

Result: <input type="checkbox"/> Pass with Honours (4 of 5 elements Gold) <input type="checkbox"/> Pass (4 of 5 elements Silver or better) <input type="checkbox"/> Retry	Total Overall Assessment	Bronze	Silver	Gold



Skate Canada Skills Assessment STAR 9

Standards of Assessment

Standards			
CRITERIA *Overall element assessment cannot exceed criteria rating.	BRONZE (below standard)	SILVER (standard)	GOLD (above standard)
Accuracy* Correct skating technique, symmetry and shape of edges.		Edge entering and exiting the turn is consistent with reasonable flow and symmetry. Skater uses correct skating technique.	
Carriage/Clarity Carriage and clarity of movement.		Skater carries themselves with good posture. Core balance is generally strong and body lines are pleasing. Movements are generally precise.	
Edge Quality Balance, control, and edge depth.		Edges correct with some depth demonstrated. Moderate balance and control demonstrated.	
Power* Varied use of power, speed, acceleration, flow and glide.		Skater generates speed using blade pushes. Sometimes able to maintain speed and demonstrate acceleration using varied tempo of stride. Some evidence of flow and glide.	
Consistent Criteria Assessment Position* Quality of position	Poor position with limited extension. Break in body lines apparent.	Edge entering and exiting the turn is consistent with reasonable flow and symmetry. Skater uses correct skating technique.	Good position with full extension. Body lines are pleasing.

Additional Comments: