



PELAGIC Boat Owner – Skipper Evaluation

Applicant's Name _____ Sail Date(s) _____
 Evaluating Member _____ Day Sail _____ Overnight _____
 Boat Name _____

Sailing Location and Conditions:

Cruising Ground _____
 Wind _____
 Seas _____
 Weather _____
 Other Conditions _____

Note to the Applicant: You are not required to complete all items on each sail; however an effort should be made to complete each item at least once during the evaluating process. Please contact your advocate or the Vice Commodore with any questions or concerns, and remember to have some fun along the way.

Evaluate the boat prior to getting underway:

(The boat owner / skipper should provide specific instructions regarding any uniqueness of the boat.)

The boat has all USCG required equipment on board, current and in good condition?

(Check Yes or No clearly)

- | | | |
|--|-----------|----------|
| 1. A PFD for each person on board | Yes _____ | No _____ |
| 2. Correct type and amount of fire extinguishers | Yes _____ | No _____ |
| 3. Correct sound device | Yes _____ | No _____ |
| 4. Visual distress signals (e.g. flares) | Yes _____ | No _____ |
| 5. Running, steaming, and anchor lights | Yes _____ | No _____ |
| 6. Bilge and other pumps or bailers | Yes _____ | No _____ |
| 7. Boat in overall safe condition | Yes _____ | No _____ |

The boat was also equipped with recommended equipment, current and in good condition?

(Check Yes or No clearly)

- | | | |
|--|-----------|----------|
| 1. Navigation charts of the sailing area | Yes _____ | No _____ |
| 2. Basic plotting tools | Yes _____ | No _____ |
| 3. Tide and current tables of the sailing area | Yes _____ | No _____ |
| 4. VHF radio and GPS | Yes _____ | No _____ |
| 5. MOB (e.g. LifeSling or horseshoe) equipment | Yes _____ | No _____ |
| 6. Handheld compass | Yes _____ | No _____ |
| 7. Plugs for all through hull fittings | Yes _____ | No _____ |
| 8. Anchor and rode | Yes _____ | No _____ |
| 9. Toolkit appropriate for boat | Yes _____ | No _____ |
| 10. Binoculars | Yes _____ | No _____ |
| 11. First aid kit | Yes _____ | No _____ |

Applicant's Name _____

Key for numerical scores:

<i>4</i>	<i>Solid knowledge; no coaching required.</i>
<i>3</i>	<i>Sufficient knowledge; minimal coaching needed</i>
<i>2</i>	<i>Needs coaching but learns quickly.</i>
<i>1</i>	<i>Needs further training.</i>
<i>n/a</i>	<i>Not applicable or not observed.</i>

Evaluate how the applicant managed the following procedures prior to getting underway:

1.	Trip planning (arrangements, special needs, timing, etc.)	4	3	2	1	n/a
2.	Explained location and use of all safety gear	4	3	2	1	n/a
3.	Explained location and use of MOB gear and procedures	4	3	2	1	n/a
4.	Explained location and use of VHF radios	4	3	2	1	n/a
5.	Explained use of head	4	3	2	1	n/a
6.	Explained use of galley and water pumps	4	3	2	1	n/a
7.	Explained use of bilge pump?	4	3	2	1	n/a
8.	Explained use of engine and basic electronics	4	3	2	1	n/a
9.	Explained location and purpose of all running rigging	4	3	2	1	n/a
10.	Showed location and use of fenders and docking gear	4	3	2	1	n/a
11.	Encouraged questions about boat and sailing	4	3	2	1	n/a

Key for numerical scores:

4	<i>Solid knowledge; no coaching required.</i>
3	<i>Sufficient knowledge; minimal coaching needed</i>
2	<i>Needs coaching but learns quickly.</i>
1	<i>Needs further training.</i>
n/a	<i>Not applicable or not observed.</i>

Evaluate how the applicant managed the following procedures underway:

1.	Knot tying: bowline	4	3	2	1	n/a
2.	Knot tying: figure 8	4	3	2	1	n/a
3.	Knot tying: square knot	4	3	2	1	n/a
4.	Knot tying: clove hitch	4	3	2	1	n/a
5.	Knot typing: cleat a line	4	3	2	1	n/a
6.	Knot tying: two half hitches	4	3	2	1	n/a
7.	Demonstrated right of way under sail?	4	3	2	1	n/a
8.	Demonstrated right of way under power?	4	3	2	1	n/a
9.	Divided and assigned duties among the crew (based on abilities)?	4	3	2	1	n/a
10.	Showed competency in the use of charts?	4	3	2	1	n/a
11.	Showed competency in the use of GPS?	4	3	2	1	n/a
12.	Showed competency in the use of VHF radio?	4	3	2	1	n/a
13.	Piloted the boat competently?	4	3	2	1	n/a
14.	Communicate clearly with crew?	4	3	2	1	n/a
15.	Showed competency handling the boat under power?	4	3	2	1	n/a
16.	Showed competency tacking and jibing, including sail trim?	4	3	2	1	n/a
17.	Showed proper sail trim close-hauled and on close reach?	4	3	2	1	n/a
18.	Showed proper sail trim on beam reach?	4	3	2	1	n/a
19.	Showed proper sail trim on broad reach or run?	4	3	2	1	n/a
20.	Helmsmanship close hauled and on a run?	4	3	2	1	n/a
21.	Demonstrated proper reefing technique?	4	3	2	1	n/a
22.	Picking up and casting off a mooring?	4	3	2	1	n/a
23.	Picking an anchorage spot and determining scope?	4	3	2	1	n/a
24.	Lowering anchor and weighing anchor?	4	3	2	1	n/a
25.	Showed competency in docking?	4	3	2	1	n/a

Applicant's Name _____

Overall evaluation:

What are this applicant's strengths?

What skills need strengthening?

Other information? Other skills observed? Do you have comments on any areas of the evaluation?

Would you recommend this applicant to other Pelagic members? Yes _____ No _____

Why or why not? Please indicate the reasons for your recommendations and be as specific as possible.
Use this evaluation and attach another page, as necessary.

Evaluating Member's Signature: _____ Date: _____

Please return completed form to the Vice Commodore within one week of the evaluation.

Thank you for your participation in the evaluating process!