

TOT & PRE-ALPHA TEST



MBR. NO.# _____ SKATER NAME _____
(Family Name) (First Name)

BIRTHDATE _____ ADDRESS _____
DD / MM / YYYY

MBR. NO.# _____ Examiner _____
(Family Name) (First Name)

MBR. NO.# _____ Rink / Club _____ T-PAT_en_v14a

Send original to: Ice Skating Institute Asia, GPO Box No. 579, General Post Office, Hong Kong SAR China. Make a photocopy for rink or club.

TEST DATE _____

TOT 1		
Maneuvers Required	Pass	Incomplete
1. Proper Way To Fall	_____	_____
2. Proper Way To Get Up	_____	_____
3. Marching in Standing Position	_____	_____
4. Marching While Moving	_____	_____

TOT 2		
Maneuvers Required	Pass	Incomplete
1. Two-Foot Jump In Place	_____	_____
2. Forward Swizzle Standing Still	_____	_____
3. Single Swizzle	_____	_____
4. Beginning Two-Foot Glide	_____	_____

TOT 3		
Maneuvers Required	Pass	Incomplete
1. Push and Glide Stroking	_____	_____
2. Preparation for Snowplow Stop	_____	_____
3. Dip	_____	_____
4. Forward Swizzle	_____	_____

TOT 4		
Maneuvers Required	Pass	Incomplete
1. T-Position and Push	R _____ L _____	_____
2. Backward Swizzle	_____	_____
3. 2-Foot / 1-Foot Snowplow Stop	_____	_____
4. Backward Wiggle	_____	_____

PRE-ALPHA		
Maneuvers Required	Pass	Incomplete
1. Two Foot Glide	_____	_____
2. One Foot Glide	R _____ L _____	_____
3. Forward Swizzle	_____	_____
4. Backward Wiggle	_____	_____
5. Backward Swizzle	_____	_____