FORM 2 JUDGING SHEET

25239

TITLE OF EVENT	
art medium category (if needed)	DATE

JUDGES NAME _____

judge signature _____

SCORE 1 - 10 UNDER EACH OF THE TEN ELEMENTS

BEST POSSIBLE TOTAL SCORE IS **100**

	(depending on event) ARTIST NAME/ BOOTH NAME/APP # TITLE OF ARTWORK	booth#/ artist ID/ application#	IMPACT	TITLE	ORIGINALITY	SUBJECT MATTER & STORY TELLING	CENTER OF INTEREST	COMPOSITION	SKILL SET	USE OF COLOR AND LIGHT	STYLE	PRESENTATION	TOTAL SCORE
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													
16													
17													

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18														
19														
20														
21														
22														
23														
24														
25														