## **UIL State CX Debate School Judge Information Form** 2025

Judges will need a laptop or tablet computer to access electronic ballots, we will be using the Speechwire tournament system this year. Instructions on registering will be posted to the UIL CX State Tournament website.

This form is for CX judges fulfilling a school obligation judging on behalf of a school.

If this does not describe your role, please select the appropriate form here.

Judge Contact Information				
First Name*	Last Name*			
School Phone	Evening Phone			
Mobile Phone *				
Preferred E-mail Address *	Alternate E-mail Address			
Do you have any mobility issues?	*			
○Yes ○No				
	it advances only 1 to the elimination bracket, are you the ge rounds as long as the school is in competition?*			
○ Yes ○ No				
School/Debater Information				
UIL District Number *	<b>Conference *</b> ○ 1A ○ 2A ○ 3A ○ 4A ○ 5A ○ 6A			
School City *	School Name *			

First Name L	ast Name
First Name L	ast Name
Any debaters have mobility issues?*(	○Yes ○No
Please specify whether you are the coabbligations.*	ach for this school or only fulfilling judging
$\bigcirc$ Coach $\bigcirc$ Fulfilling Obligation	
Coach Contact Information (If ju	dge is not the coach.)
First Name*	Last Name *
School Phone	Evening Phone
Mobile Phone*	Fax
Preferred E-mail Address*	Alternate E-mail Address
Does the coach have any mobility issu	es?* O Yes O No
CX Debate Experience	in the box below. Be as detailed as possible. *
ricase summarize your ex experience	in the box below. Be as detailed as possible.
Specific Experience * (Please provide specific details of your deba	ate experience where applicable.)
Policy debate in high school	Where?
	When?
	Year graduated?

Policy debate (NDT) in college	Where? When?
Policy debate (CEDA) in college	Where? When?
LD debate (NFA) in college	Where? When?
Policy debate (NPDA) in college	Where? When?
Coach policy debate in high school	Where? When?
Coach policy debate in college	Where? When?
Judge policy debate often?	○ Yes ○ No
Number of tournament rounds judged this year on this topic *	
Number of tournaments judged this year *	
List a minimum of 3 tournaments where you have judged on this topic: *	
cover specific details of the criteria you use to e restatement of the checklist items further down and delivery preferences in the philosophy box;	your CX judging philosophy. This description should evaluate CX debate rounds; it should not merely be at the page. Elaborate. Also, please do not include styluse the separate box provided. Submit will be made available to tournament you write and proof for typing errors!

Style and Delivery Preferences (100 words max.) If necessary, you may include a link to a lengthier statement.

**F. Kritiks:**  $\bigcirc$  1  $\bigcirc$  2  $\bigcirc$  3  $\bigcirc$  4  $\bigcirc$  5 (Range - 1=Unacceptable, 5=Acceptable)

(Range - 1=Unacceptable, 5=Acceptable)

**D. Disadvantages:**  $\bigcirc 1 \bigcirc 2 \bigcirc 3 \bigcirc 4 \bigcirc 5$ 

**E. Conditional arguments:**  $\bigcirc 1 \bigcirc 2 \bigcirc 3 \bigcirc 4 \bigcirc 5$ 

(Range - 1=Not Essential, 5=Essential)

G. New Arguments in the 2nd Negative Constructive:	$\bigcirc$ 1 $\bigcirc$ 2 $\bigcirc$ 2 $\bigcirc$ 4 $\bigcirc$ 5
Negative Constructive:	0102030405

(Range - 1=Unacceptable, 5=Acceptable)

List any schools or teams you should not judge due to current or prior affiliation (within 5 years). Include all schools or debaters you have coached, conducted workshops or clinics with, etc. If none, enter "none."

Important: include their UIL conference 1A-6A following each school you list below.

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**IMPORTANT:** Please scroll back through and verify that you have entered all required responses and all information correctly AND completely **BEFORE** clicking **Submit**. You will not be able to make further changes after you click **Submit**. **You are advised to save a copy or take a screenshot for your records.** Please click **Submit** only once.

After hitting submit please be patient and wait for the confirmation page.

\*\*\*\*\*\* DO NOT HIT THE BACK BUTTON\*\*\*\*\*\*

If you hit the back button and resubmit, it will create a false record and we will not receive your information.

The confirmation page states specifically that your form has been submitted, and stamps the date and time of submission. **Print this confirmation for your records and file it in a safe place.** If the confirmation does not list your correct first and last name at the top, the form has not been successfully submitted.

If you do not receive a confirmation, we have not received your form. Review all required fields and try again.

Submit form