

Adjustment Enquiry Sheet (ADJ Sheet)



Gymnast's Name: _____

Gymnast's University: _____

Gymnast's Number: _____

Category: FIG ADV+ ADV INTER NOV

Apparatus: VT FX BB UB PB SR HB PH

Stated Adjustment/s (By Gymnast/Captain/Coach):

Stated Adjustment/s (By JJ/SJ):

Evidence Submitted: No Yes

Adjustment Permitted: No Yes

JJ/SJ Comments: _____

JJ/SJ Signature: _____ Date: _____