

Do not show scores to the students, teachers or guests. Please return all completed score sheets to the trial Coordinator at the conclusion of each trial.

**ISBA HIGH SCHOOL  
MOCK TRIAL PROGRAM  
JUDGE'S SCORESHEET**

Please indicate the school/ team name for the:

**Petitioner/Plaintiff/Prosecution:** \_\_\_\_\_

**Respondent/Defendant/Defense:** \_\_\_\_\_

Please rate the teams using the following scale for overall achievement. Please do NOT use fractional points.

Points awarded may not exceed **45** for each team.

I AWARD THE PETITIONER TEAM \_\_\_\_\_ OVERALL ACHIEVEMENT POINTS.

I AWARD THE RESPONDENT TEAM \_\_\_\_\_ OVERALL ACHIEVEMENT POINTS.

1-9 Not effective

10-18 Fair

19-27 Good

28-36 Excellent

37-45 Outstanding

I award this ballot to:

\_\_\_\_\_ Plaintiff Team

\_\_\_\_\_ Defense Team

\_\_\_\_\_  
Nomination for OUTSTANDING ATTORNEY \_\_\_\_\_

Nomination for OUTSTANDING WITNESS \_\_\_\_\_

Judge's Signature \_\_\_\_\_

Thank you.