## ICF PARACANOE – VA'A - Athlete Classification SUMMARY

To complete before the evaluation	Athlete Name:	Federation:	
	Has athlete had previous classification? Yes No		
	National:	Date of testing: Classifiers:	
	International:	Event: Classifiers:	
	Current classificati	ion testing place and date:	
	Classifier team	Medical: Technical:	
	Athlete competes	in: Va'a Both Kayak and Va'a	
ation	Date & time athlet	te has finished the classification evaluation:	
	By signing this form, the classifiers acknowledge the athlete has completed the classification evaluation on the date written above and for the boat category defined:		
evalu	Signature, ICF classifier(Medical) Signature, ICF classifier (Technical)		
To complete at the end of the evaluation			
		m, the athlete acknowledges he/she has completed the classification evaluation on the date written boat category mentioned: Athlete Printed Name	
To complete when Sport Class and status are final		d sport status will be posted on the classification masterlist, and published at the end of each day of the od on the ICF paracanoe webpage.	
	Classification after	r evaluation: VL1 VL2 VL3 NE Va'a	
	Classification statu		
	0.A.:	Review: Review with fixed date: Confirmed:	
	If observat water on a late		
	Comments:		
To comp.			

## VA'A MINIMUM IMPAIRMENT CRITERIA

Athlete Name:.....

