

Volleyball Individual Skills Scorecard

Athlete's Name _____

County _____

M/F _____

Age _____

Division # _____

Events	1	2	3	4	5	6	7	8	9	10	Score
1. Overhead Passing											
2. Serving											
3. Forearm Passing											
Total											

Scoring	Points
Overhead Passing	0, 1, or 3
Serving	0, 1, 3, or 5
Forearm Bumping	0, 1, 2, 3, 4, or 5



**Special
Olympics**
Pennsylvania