



THE AMERICAN ASSOCIATION
OF PHILATELIC EXHIBITORS
EXHIBITORS' CRITIQUE SERVICE APPLICATION

Today's Date: _____

File Number: _____

Submit application to:

AAPE Critique Service
c/o Jay B Stotts
P.O. Box 690042
Houston, TX, 77269-0042,
U.S.A.

Date Received by Service: _____

Date Received by Judge: _____

Date Returned by Judge: _____

INSTRUCTIONS TO EXHIBITOR: Please submit all pages, including title page (max: 160) of **ONE** philatelic exhibit per application. Your exhibit will be reviewed in writing by an exhibit judge qualified in your subject area, or specialty, subject or topic. The exhibit submitted must be the sole property of the exhibitor. **All submissions MUST include a "Synopsis" for the exhibit to be evaluated.**

REQUIREMENTS: (1) Submit (4) four copies of this application together with (1) **CLEAR FULL SIZED PHOTOCOPY** of all the exhibit pages (single sided/ 8"x10" size pages). (2) Please **NUMBER PAGES** on the front lower right or left and send in order of numbering. (3) **We suggest mailing by flat-rate USPS Priority Envelope (Postage Standard Flat Rate Priority Envelope: US \$7.75, Legal Size: US \$8.05). DO NOT** mail using plastic mailing or Jiffy bags, since they tear and are not biodegradable. If your exhibit should not fit into the Priority Envelope, then send in a sturdy kraft-type envelope along with two UNADDRESSED similar envelopes for forwarding purposes. (4) **DO NOT** use cardboard around the pages nor put such in a binder of any kind since such offers little extra protection but only adds weight to mailing cost. (5) Enclose a stamped (Commemorative stamp please) unaddressed #10 envelope. (6) Along with your application, please remember to include US **\$25.00** (USA applicants) or US **\$55.00** (non-USA applicants) in cash, check drawn against a US-domiciled bank or by PayPal (aape@comcast.net). **Checks should be issued to "Jay Stotts"**. Application fee covers mailing cost to the judge and return of the exhibit to you. (7) The judge will write on the pages, as applicable, and will summarize information on the reverse of your application. ((8) The judge's name will remain anonymous at his/her discretion. (9) The mailing of photocopied pages need not be insured, but, if you require insurance, please add US\$10.00 to your application fee for forwarding and return of your pages in the same manner. (10) Please attempt to give as much lead time before a forthcoming show as possible so that the critique isn't rushed by the judge. Please note that judges have other commitments, which might preclude their handling a critique on short notice. Thus, please allow yourself enough time before submitting the exhibit.

YOUR NAME: _____ AAPE No. _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

EMAIL: _____

TITLE OF YOUR EXHIBIT: _____

AWARDS WON/WHERE/WHEN: _____

Adult : _____ Youth: _____ Age _____

Next Show & Date: _____

INSTRUCTIONS TO JUDGE

This exhibit photocopy may be reviewed by using this form AND by entering particular advice/criticism on the page photocopies. In any case, please indicate your critique comments directly on **THIS FORM** under the categories listed on 'Page 2'.

PLEASE COMPLETE YOUR EVALUATION AND COMMENTS WITHIN 30 DAYS and enter the **COMPLETION DATE** on the line at the top of form. You may remain anonymous if desired. Enclosed is sufficient postage for the return on this entry to the exhibitor upon completion of your critique. The exhibitor and the AAPE Board of Directors thank you for your assistance. **NOTE:** Please retain **ONE COPY** of this form (once completed by you) for your records.

SEND ONE COPY BACK TO THE EXHIBITOR AND ONE IN SUPPLIED ENVELOPE to AAPE Critique Service c/o Jay B Stotts, P.O. Box 690042, Houston, TX, 77269-0042, U.S.A. (MAY BE PHOTOCOPIED).

Page 2 File Number _____ Date Evaluation was completed by judge _____

TO THE JUDGE: Please enter suggestions for improving this exhibit under the categories listed below.

1. Title & Treatment:

2. Knowledge, Study and Research:

3. Rarity and Condition:

4. Presentation :

5. Comments & Recommendations:

6. Overall Impression of Exhibit:

8. Heretofore Medal Level and Suggestions for Consideration to Raise Medal Level:

Judge's Signature (optional) _____

Approximate Time Spent (Optional) on AAPE File Copy returned: _____ (for statistical purposes)