Specialty Coffee Association Arabica Cupping Form

Specialty Coffee Association

Name: _____

Table no: _____

Date: _____

Quality Scale

6.00 - GOOD	7.00 - VERY GOOD	8.00 - EXCELLENT	9.00 - OUTSTANDING
6.25	7.25	8.25	9.25
6.50	7.50	8.50	9.50
6.75	7.75	8.75	9.75

Sample No.

Roast Level of Sample

Fragrance/Aroma — Dry 6 7 8 9 10 — Qualities 6 7 8 9 10 — Break 6 7 8 9 10

Flavor — Aftertaste 6 7 8 9 10

Acidity — Intensity 6 7 8 9 10 — Low / High

Body — Level 6 7 8 9 10 — Thin / Heavy

Uniformity ☐☐☐☐☐

Balance 6 7 8 9 10

Clean Cup ☐☐☐☐☐

Sweetness ☐☐☐☐☐

Overall 6 7 8 9 10

Defects (subtract) Taint - 2 # of cups ☐ X intensity ☐ = ☐

Fault - 4 # of cups ☐ X intensity ☐ = ☐

Final Score ☐

Notes: