**TEACHING EXERCISE EVALUATION FORM**

**BASIC INSTRUCTOR TRAINING COURSE**

Participant: Title of Presentation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Use the following scale to evaluate the student's performance during each teaching exercise.

5 - Needs No Improvement; 4 - Exceeds Standards; 3 - Meets Standards; 2 - Below Standards, improvement needed; 1 - Not Acceptable, does not meet course standards.

**PREPARATION**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Instructor | | 5 | 4 | 3 | 2 | 1 |
|  | |  |  |  |  |  |
| Instructor had classroom, equipment & materials ready. | | 5 | 4 | 3 | 2 | 1 |
|  | |  |  |  |  |  |
| Instructor's lesson plan was properly prepared. | | 5 | 4 | 3 | 2 | 1 |
|  | |  |  |  |  |  |
| Instructor properly introduced self and topic. | | 5 | 4 | 3 | 2 | 1 |
|  | |  |  |  |  |  |
| Instructor stated objective(s). | | 5 | 4 | 3 | 2 | 1 |
|  | |  |  |  |  |  |
| Instructor established contact with class. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructor motivated audience to listen. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| **Remarks:** |  |  |  |  |  |

**PRESENTATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Instructor's demeanor and mannerisms-s were  positive and effective. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Key points were presented in a logical order. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Key points were presented clearly and given emphasis. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructor used a variety of methods of instruction. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructor involved students in the lesson. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructor prepared and used specified  number of instructional aids. | 5 | 4 | 3 | 2 | 1 |
| Page 1 of 2 Pages  Participant: PID#\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |
| Instructional aids were relevant. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructional aids were neat. Clear and visible to all students. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructional aids were used effectively. (Emphasis  on key points) | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructor met specified time limit. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| **Remarks:** |  |  |  |  |  |

**APPLICATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Instructor defined the application phase. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructor used effective review and questioning  techniques to determine if information was learned. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructor involved students in applying  their new knowledge. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| **Remarks:** | 5 | 4 | 3 | 2 | 1 |

**EVALUATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Instructor met the lesson objective(s). | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Evaluation was based on the lesson objective(s). | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Evaluation instrument was properly structured. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| Instructor’s evaluation was comprehensive. | 5 | 4 | 3 | 2 | 1 |
|  |  |  |  |  |  |
| **Over all Presentation Evaluation:** | **5** | 4 | **3** | **2** | **1** |

Signature of Evaluator: Date:

Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

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OVER-ALL TCLEOSE BASIC INSTRUCTOR COURSE EVALUATION

Participant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_

PID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***PREPARATION REMARKS***:

*PRESENTATION REMARKS:*

***APPLICATION REMARKS:***

*EVALUATION REMARKS:*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Over all Presentation Evaluation:** | **5** | 4 | **3** | **2** | **1** |

PASSED met course standards FAILED to meet course standards

Signature of Evaluator: Date:

Signature of Evaluator: \_\_ Date:

Signature Agency TCOLE TNG Coordinator:: Date:

Signature of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_