

INSTRUCTOR EVALUATION CHECKLIST					DATE	
INSTRUCTIONS: Mark (X) each item in Section I as SUPERIOR (S), GOOD (G), WEAK (W). Items which are not applicable to the type of lesson presented will be (NA). Follow-up evaluation is required in Section IV within 30 days when any block is rated "WEAK" (W).						
NAME <i>(Last, First, Middle Initial)</i>			ORGANIZATION		TIME STARTED	
EVALUATOR			COURSE		SUBJECT	
I	ITEMS	RATING <i>(Mark X)</i>				COMMENTS <i>(Instructional improvement techniques covered in the evaluation debriefing)</i>
		S	G	W	NA	
	1. CONDITION OF TRAINING AREA <i>(Subject to instructor control)</i>					
	A. HOUSEKEEPING <i>(Cleanliness, equipment operation, etc.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	B. ENVIRONMENTAL FACTORS <i>(Temperature, ventilation, noise, lighting, etc.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2. INSTRUCTOR EFFECTIVENESS IN					
	A. PREPARING FOR INSTRUCTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	B. LESSON PLAN USE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	C. INSTRUCTIONAL TECHNIQUES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	D. COMMUNICATIVE SKILLS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	E. USE OF TRAINING AIDS/MATERIALS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	F. QUESTIONING TECHNIQUES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	G. RAPPORT WITH STUDENTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	H. SHOWING INTEREST AND ENTHUSIASM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	I. SUPERVISING STUDENT ACTIVITIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	J. APPRAISAL/SUMMARY TECHNIQUES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	K. EMPHASIZING PROPER USE OF TECH DATA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	L. ENCOURAGING MAXIMUM STUDENT PARTICIPATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	M. HELPING STUDENTS WHEN NEEDED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	N. PROVIDING GUIDANCE FOR STUDENTS AS NEEDED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	O. ENCOURAGING AND MOTIVATING STUDENTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	P. MASTERY OF SUBJECT MATTER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Q. EMPHASIZING SAFETY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	R. PERSONAL APPEARANCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	S. INTEGRITY AND PROFESSIONALISM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

I. ITEMS (Continued)	RATING (Mark X)				COMMENTS (Instructional improvement techniques covered in the evaluation debriefing)					
	S	G	W	NA						
3. OTHER (For optional use by supervisor)										
A.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
B.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
C.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
II. ACKNOWLEDGEMENT OF INTERVIEW										
SIGNATURE OF EVALUATOR		DATE AND SIGNATURE OF INSTRUCTOR EVALUATED		SIGNATURE OF IMMEDIATE SUPERVISOR OF EVALUATOR						
III. RECOMMENDATIONS FOR IMPROVEMENT										
IV. FOLLOW-UP EVALUATION (Required for items checked as weak within 30 days)										
SIGNATURE OF SUPERVISOR			DATE	SIGNATURE OF INSTRUCTOR EVALUATED	DATE					