

# Practice Simulation

## Team Evaluation

Date: \_\_\_\_\_

Name: \_\_\_\_\_

**Internal Communication**

Poor

Avg

Good

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**External Communication**

Poor

Avg

Good

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**Workload Sharing**

Poor

Avg

Good

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**Strategizing**

Poor

Avg

Good

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**Effectiveness**

Poor

Avg

Good

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**Awareness**

Poor

Avg

Good

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