

# Evaluation Feedback Form for Creating a Skill Acquisition Program

Supervisee:

Overseeing BCBA:

Date Start: _____ Date End: _____ Program Name: _____	Yes	No	N/A	Comments
Obtains at least one relevant research article to support program development (if yes, include article title):				
Completes draft in timely fashion (defined as no longer than 5 business days from request to draft program)				
Objective passes the Behavioral Objective Checklist (see additional check list)				
Program sheet includes the following necessary components (only check yes if ALL boxes are checked) <input type="checkbox"/> Objective <input type="checkbox"/> Prerequisite skills <input type="checkbox"/> Materials <input type="checkbox"/> Data sheet explained <input type="checkbox"/> Sets/Phases <input type="checkbox"/> Set up <input type="checkbox"/> Implementation <input type="checkbox"/> Response to correct responding and error correction <input type="checkbox"/> Phase/set change and Mastery Criterion <input type="checkbox"/> Set lists of targets <input type="checkbox"/> References				
Sends Draft to BCBA via email				
Sends Draft data sheet to the BCBA via email				
Excluding aesthetics (e.g., font size, indents, bulleting) or other minor changes such as minor grammatical errors, there are less than 3 changes that need to be made to the document				
Sends reminder email if applicable				
Makes necessary changes to the program provided by the BCBA within 3 business days				
Finalizes document <ul style="list-style-type: none"> <li>Prints program and data sheets and adds to client's binder</li> <li>Sets up training with all technicians</li> </ul>				
To calculate score, add all the "yes" checked boxes out of a possible total of 10. A score of 100% is necessary to get signed off for competency for 3 skill acquisition programs across 3 different domains/skill areas	Score: _____/10 = _____ %			

## SKILLS TO MAINTAIN AND/OR SKILLS IMPROVED/CHANGED FROM LAST EVALUATION (if applicable)

1.	
2.	
3.	

## SKILLS TO WORK ON

1.	
2.	
3.	

BCBA Signature: \_\_\_\_\_

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

Supervisee Signature: \_\_\_\_\_

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