



### CLASSROOM ASSESSMENT FOR EXPERIENCED INSTRUCTORS

**THIS ASSESSMENT SHALL ENCOMPASS ONE FULL CLASS AND BE AT LEAST 2 HOURS OF INSTRUCTING A STUDENT**

Class D Instructor

Abbreviated Adult Instructor

CDL Instructor

CRITERIA	INEFFECTIVE	DEVELOPING	PROFICIENT	COMMENTS
1. Current textbooks or workbooks and / or other materials used for classroom instruction were available to every student.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Instructor ensured that students were listed on a class roster.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Instructor clearly stated learning goals and objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Instructor exhibited a professional appearance and demeanor.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Class and designated break times were started and ended promptly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Instructor provided reasonable content and materials for the lesson including appropriate video / visual materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Instructor directed students to stay on topic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Instructor kept all students engaged during the session in a professional engaging manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Instructor demonstrated knowledge of content being taught.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Instructor used a variety of teaching skills and methods.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Instructor used correct terminology.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Instruction was given in a clear and concise manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Classroom discipline was maintained and the environment was conducive to learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Instructor assigned student activities which relate to the lesson objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Instructor provided hands on exercises for students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Instructor linked prior learning to new material during the session.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Instructor encourages students to apply what they have learned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. The instructor monitored student comprehension of content and communicated feedback to students in a timely manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Instructor evaluated whether the stated objectives were met.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Identification badge was worn in a conspicuous place and a copy of the instructor license was available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Instructor completes the Student Classroom Training Report and has the student sign/initial after each lesson. (DTO 0138, DTO 0166, or DTO 0217)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

DATE	START TIME	END TIME	BREAK TIMES	ENTERPRISE
STATE MANDATED LESSON TOPIC(S)				
TRAINING MANAGER / ADULT COORDINATOR (PRINT NAME)	LICENSE #	TRAINING MANAGER / ADULT COORDINATOR SIGNATURE	DATE	
		<b>X</b>		

TRAINING MANAGER / ADULT COORDINATOR COMMENTS:

<b>INSTRUCTOR:</b> My signature below acknowledges that I have reviewed this assessment with my Training Manager/Adult Coordinator.			
INSTRUCTOR COMMENTS			
INSTRUCTOR (PRINT NAME)	INSTRUCTOR LICENSE #	INSTRUCTOR SIGNATURE	DATE
		<b>X</b>	