

CIC (Intern) \_\_\_\_\_ EMT # \_\_\_\_\_

Course Sponsor \_\_\_\_\_ Location \_\_\_\_\_

Course # \_\_\_\_\_ Audit Date \_\_\_\_\_ Session Audited \_\_\_\_\_

**Document your detailed observations of each objective in the shaded areas on this report.**

Rating Scale  
Please document all negative performance

3 - Excellent performance. Demonstrates mastery.  
2 - Positive performance or behavior observed. (good)  
1 - Neutral, no negative behavior or performance observed. (marginal)  
0 - Negative performance, counterproductive, harmful

1. Is expert in subject matter and prepared for the presentation.

3     2     1     0

2. Explains goals and objectives of session to students.

3     2     1     0

3. Presentation is organized in a logical manner and follows the curriculum.

3     2     1     0

4. Able to explain concepts and relate them to student's knowledge and experience.

3     2     1     0

5. Elicits student participation in presentation.

3     2     1     0

6. Provides reinforcement and feedback to students .

3     2     1     0

7. Material presented is technically accurate and within the scope of the audience.

3     2     1     0

8. Presentation is interesting, stimulating and holds the auditor's attention.

3     2     1     0

9. Audio-visuals used to emphasize and highlight subject matter.

3     2     1     0

10. No distracting habits were displayed during the presentation.

3     2     1     0

COMMENTS

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Auditor's Name (Printed) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_