

**FIRE SERVICE INSTRUCTOR II**

**PRACTICAL SKILLS**

**CERTIFICATION EVALUATION PACKET**

**(NFPA Standard 1041, 2019 Edition)**

### **Completion of the practical examination process:**

In order to successfully complete the Fire Instructor II practical examination and practical projects, the candidate must demonstrate the following:

- These Skill Sheets must be signed by the program evaluator, indicating that all skills were successfully completed during the program
  - The Program Instructor must keep a copy of all signed skill sheets for audit purposes, for each candidate for a period of one year or at least until receiving official notice from AZCFSE that all candidates are marked complete on all skills after the final audit.
- The Program Instructor and Evaluator must sign page 24 indicating that all skills were completed during the program (completion of 100% of skill sheets is required to receive certification. If any skills were not completed, note which skill number is incomplete on page 24

A candidate will be marked incomplete on the skill projects for this program until such time as AZCFSE receive documentation of the candidate's successful completion of all requirements.

**All Skill Project Packets must be received within one year of program completion for a candidate to be eligible for certification. Candidates marked incomplete after one year, must complete another program to be eligible to test for certification again.**

**IMPORTANT NOTE: Fire Instructor I is a prerequisite for Fire Instructor II and all candidates are required to demonstrate certification in Fire Instructor I prior to testing for Fire Instructor II.**

<b>Candidate:</b>	<b>Date:</b>
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<b>STANDARD:</b> NFPA 1041, 5.2.2, 5.2.3, 5.2.4	<b>SKILL AREA:</b> <b>Schedule Instructional Sessions</b>
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**TASK:** Assign instructional sessions, given department scheduling policy, instructional resources, staff, facilities, and timeline for delivery, so the specified sessions are delivered according to departmental policy.

**PERFORMANCE OUTCOME:** The candidate will assign instructional sessions, so the specified sessions are delivered according to department or model policy.

**EQUIPMENT:** Local departmental scheduling policy or model policy.

**CONDITIONS:** Given department scheduling policy or model policy, instructional resources, staff, facilities, and time line for delivering training sessions, the candidate shall:

		<b>P</b>	<b>F</b>
1.	Assign instructional sessions according to policy.	<input type="checkbox"/>	<input type="checkbox"/>
2.	Complete written documentation related to instructional sessions according to policy.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Comments:</b>

\_\_\_\_\_ *Evaluator Name*                      \_\_\_\_\_ *Date*

\_\_\_\_\_ *Evaluator Signature*

<b><u>Overall Skill Sheet Result:</u></b>
Pass: <input type="checkbox"/> Fail: <input type="checkbox"/>

<b>Candidate:</b>	<b>Date:</b>
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<b>STANDARD:</b> NFPA 1041, 5.2.3, 5.2.4	<b>SKILL AREA:</b> Formulate Budget
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**TASK:** Conduct a needs analysis and recommend budget needs, so that the resources required for training goals are identified and documented.

**PERFORMANCE OUTCOME:** The candidate will conduct a needs analysis, formulate budget needs, and identify and document the resources required to meet training goals.

**EQUIPMENT:** Local AHJ SOP/SOG, budget policy, and other related forms

**CONDITIONS:** Given department training goals and current resources the candidate shall:

		<b>P</b>	<b>F</b>
1.	Analyzes department policies, instructional resources, instructional staff, and facilities	<input type="checkbox"/>	<input type="checkbox"/>
2.	Conducts and documents a needs analysis.	<input type="checkbox"/>	<input type="checkbox"/>
3.	Identifies training goals	<input type="checkbox"/>	<input type="checkbox"/>
4.	Identifies department budget process policy	<input type="checkbox"/>	<input type="checkbox"/>
5.	Identifies current resources	<input type="checkbox"/>	<input type="checkbox"/>
6.	Identifies and documents resources to meet training goals	<input type="checkbox"/>	<input type="checkbox"/>
7.	Submits completed budget for course (i.e. schedule, equipment costs, instructor, etc.) so that training goals are met.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Comments:</b>

\_\_\_\_\_ *Evaluator Name* \_\_\_\_\_ *Date*

\_\_\_\_\_ *Evaluator Signature*

<b><u>Overall Skill Sheet Result:</u></b>
Pass: <input type="checkbox"/> Fail: <input type="checkbox"/>

<b>Candidate:</b>	<b>Date:</b>
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<b>STANDARD:</b> NFPA 1041, 5.2.3, 5.2.4, 5.3.2, 5.3.3	<b>SKILL AREA:</b> Acquire Training Sources
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**TASK:** Acquire training resources, given an identified need so that the resources are obtained within established timelines, budget constraints, and according to agency policy.

**PERFORMANCE OUTCOME:** The candidate will acquire training resources, so the resources are obtained within the established timelines, budget constraints, and according to agency policy.

**EQUIPMENT:** Local AHJ SOP/SOG, budget policy, and other related forms

**CONDITIONS:** Given department training goals and current resources the candidate shall:

		<b>P</b>	<b>F</b>
<b>1.</b>	Documents training resources required for course according to departmental policy.	<input type="checkbox"/>	<input type="checkbox"/>
<b>2.</b>	Identifies department budget process and equipment acquisition policy	<input type="checkbox"/>	<input type="checkbox"/>
<b>3.</b>	Documents timeline for acquisition of training resources	<input type="checkbox"/>	<input type="checkbox"/>
<b>4.</b>	Documents that resources are within established budget.	<input type="checkbox"/>	<input type="checkbox"/>
<b>5.</b>	Completes appropriate budget process and acquisition forms for training resources for specific sessions.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Comments:</b>

<i>Evaluator Name</i>	<i>Date</i>
<i>Evaluator Signature</i>	

<b><u>Overall Skill Sheet Result:</u></b>
Pass: <input type="checkbox"/> Fail: <input type="checkbox"/>

## Training Course Budget Sheet

**Directions: Conduct a needs analysis and formulate budget needs, so that the resources required for training goals are identified and documented, and the training is scheduled.**

**Training Course/program Title / Topic:**

**Priority and benefit of training:**

**Proposed Delivery Dates:**

**Hours:**

**Course Fees:**

**Instructors Required & Instructor Level:**

**Facilities Required:**

**Instructor Travel Needed:**

**Additional Resources Needed:**

**Total Budgeted Amount for course: \$**

	Course Materials		Students Materials		Travel Expenses		Facilities Costs		Instructor/ Personnel Cost		
	Item	Cost	Item	Cost	Name	Cost	Name	Cost	Hours	Cost \$ per hour	Total \$
<b>Subtotal: \$</b>											
<b>Total Cost: \$</b>											

<b>Candidate:</b>	<b>Date:</b>
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<b>STANDARD:</b> NFPA 1041, 5.2.3, 5.2.4, 5.2.5	<b>SKILL AREA:</b> Coordinate Training
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**TASK:** Manage training record keeping, given training forms, department policy, and training activity, so that all agency and legal requirements are met, and understand any departmental audit process related to records.

**PERFORMANCE OUTCOME:** The candidate will coordinate training record keeping so all agency and legal requirements are met, and audit processes are understood.

**EQUIPMENT:** Local AHJ SOP/SOG, budget policy, training forms, and other related forms

**CONDITIONS:** Given training activity, the candidate shall:

		<b>P</b>	<b>F</b>
1.	Identifies department and community policies and legal requirements regarding training recordkeeping.	<input type="checkbox"/>	<input type="checkbox"/>
2.	Completes training activity form(s), according to department or model policy and provides documents for completion of training classes (i.e., roster, evaluation sheet, test results, etc.	<input type="checkbox"/>	<input type="checkbox"/>
3.	Understands departmental records auditing process.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Comments:</b>

<i>Evaluator Name</i>	<i>Date</i>
<i>Evaluator Signature</i>	

<b><u>Overall Skill Sheet Result:</u></b>
Pass: <input type="checkbox"/> Fail: <input type="checkbox"/>

**Fire and Emergency Services Instructor II  
Score Sheet**

**Class Title** \_\_\_\_\_

**Dates** \_\_\_\_\_

**Instructor** \_\_\_\_\_

Student Name	Presentation Title	Presentation Score	Written Exam Score
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

<b>Candidate:</b>	<b>Date:</b>
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<b>STANDARD:</b> NFPA 1041, 5.2.6	<b>SKILL AREA:</b> Evaluate Instructors
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**TASK:** Evaluate instructors, given an evaluation form, department policy, and job performance requirements, so the evaluation identifies areas of strengths and weaknesses, recommends changes in instructional style and communication methods, and provides opportunity for instructor feedback to the evaluator.

**PERFORMANCE OUTCOME:** The candidate will evaluate instructors so that the evaluation identifies areas of strengths and weaknesses, recommends changes in instructional style and communication methods, and provides opportunity for instructor feedback to the evaluator.

**EQUIPMENT:** Local AHJ SOP/SOG, budget policy, instructor evaluation form, and other related forms

**CONDITIONS:** Given an Instructor I evaluation form, department or model policy, and job performance requirements, the candidate shall:

		<b>P</b>	<b>F</b>
1.	Observe instructor and correctly complete instructor evaluation form (complete the form provided with FSI II 8 on page 16 of this packet)	<input type="checkbox"/>	<input type="checkbox"/>
2.	Properly identify the instructor’s strengths and weaknesses on course delivery form	<input type="checkbox"/>	<input type="checkbox"/>
3.	Make appropriate recommendations for instructional changes to style and/or communication method in “Comments” section.	<input type="checkbox"/>	<input type="checkbox"/>
4.	Provide instructor feedback to evaluation on form.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Comments:</b>

<i>Evaluator Name</i>	<i>Date</i>
<i>Evaluator Signature</i>	

<b><u>Overall Skill Sheet Result:</u></b>
Pass: <input type="checkbox"/> Fail: <input type="checkbox"/>



**Task: Develop a properly formatted lesson plan for presentation. (NFPA 1041; 5.3.2)**

*Instructions:* Assemble the components for a lesson plan to present to students in class.

The following sample lesson plan format may be used.

LESSON TITLE: Title hints at the topic and gives the learner some idea of what to expect.

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TYPE OF PRESENTATION: Identify whether presentation falls within the cognitive or psychomotor domain.

Cognitive Domain                       Psychomotor Domain

LEARNING OBJECTIVES: Describe what learners will accomplish.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

TIME FRAME: Inform the instructor how long it should take to complete the lesson.

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LEVEL OF INSTRUCTION: Describe the level of outcome desired from the lesson. Are students expected to know the material to a basic knowledge level or to the analysis level?

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MATERIALS NEEDED: List all materials required, including quantity needed, to teach the lesson.  
*Examples: number of handouts, video equipment, dry-erase board*

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REFERENCES: List the references and resources that were used to develop the lesson. Include page numbers where appropriate.

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PREPARATION (step 1): This section reminds the instructor to provide learners with a reason why they need to know this information. How or where will they use this new skill? Motivate the student to pay attention and learn from your presentation.

*Examples: Give statistics, refer to case studies and recent incidents, show a video segment.*

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PRESENTATION (step 2): Outline the lesson. This segment should be in the same order as that in which the information will be presented. Write template in a logical order, step by step, and so forth.

*Note: The following is a sample format; your lesson plan may be longer/shorter than space provided.*

- I.
  - A.
  - B.
  - C.
    - 1.
    - 2.

- II.
  - A.
  - B.
    - 1.
    - 2.
    - 3.

- III.
  - A.
  - B.
  - C.

D.

APPLICATION (step 3): Whenever new information is given or a new skill is taught, it must be followed with an opportunity for the student to apply the new knowledge. Detail what will be used to allow students to apply what was learned.

*Examples: Ask direct questions, provide an exercise, practice the skill, role-play.*

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EVALUATION (step 4): Evaluate the student's performance. This section should tie into the learning objective. Using the behavior, condition, and standard components of the objective determines how you will measure successful achievement of the objectives. In this segment, you do not need to include your test; only indicate how you will measure the students' performance.

*Examples: written exam, practical skills test, oral exam, written exercise*

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LESSON SUMMARY: Review the main points of the lesson. This helps clarify any confusion before dismissal of the class. In most cases, you can review the major topic headings in your class outline.

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<b>Candidate:</b>	<b>Date:</b>
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<b>STANDARD:</b> NFPA 1041, 5.4.2	<b>SKILL AREA:</b> Conduct Class Using Lesson Plan
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**TASK:** Conduct a class using a lesson plan that the instructor has prepared and that involves the utilization of multiple teaching methods and techniques, given a topic and a target audience, so that the lesson objectives are achieved. Apply student centered learning. **Use and evaluate instructional technology tools, evaluation techniques and resources.**

**PERFORMANCE OUTCOME:** The candidate will conduct a class using a lesson plan that the instructor has prepared and that involves the utilization of multiple teaching methods and techniques in a safe and effective manner.

**EQUIPMENT:** Local AHJ SOP/SOG, a lesson plan prepared by the instructor, and related forms

**CONDITIONS:** Given a topic and a target audience the candidate shall:

		<b>P</b>	<b>F</b>
1.	Conduct a class using a lesson plan prepared by the instructor.	<input type="checkbox"/>	<input type="checkbox"/>
2.	Use multiple teaching techniques, explain techniques used, and demonstrate transition between the different teaching methods, so that the lesson objective were met.	<input type="checkbox"/>	<input type="checkbox"/>
3.	Apply student centered learning.	<input type="checkbox"/>	<input type="checkbox"/>
4.	Use and evaluate instructional technology tools, evaluation techniques and resources.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Comments:</b>

<i>Evaluator Name</i>	<i>Date</i>
<i>Evaluator Signature</i>	

<b><u>Overall Skill Sheet Result:</u></b>
Pass: <input type="checkbox"/> Fail: <input type="checkbox"/>

<b>Candidate:</b>	<b>Date:</b>
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<b>STANDARD:</b> NFPA 1041, 5.4.3	<b>SKILL AREA:</b> Supervise Instructors
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**TASK:** Supervise other instructors and students during training, given a specialized training scenario, so that applicable safety standards and practices are followed, and instructional goals are met.

**PERFORMANCE OUTCOME:** The candidate will supervise other instructors and students during a specialized training scenario, so applicable safety standards are followed, and instructional goals are met.

**EQUIPMENT:** Local AHJ SOP/SOG, evaluation forms, and related forms

**CONDITIONS:** Given a group of instructors and a specialized training scenario, the candidate shall:

		<b>P</b>	<b>F</b>
1.	Supervise instructors appropriately according to policy during a specialized training scenario.	<input type="checkbox"/>	<input type="checkbox"/>
2.	Supervise students according to policy during a specialized training scenario.	<input type="checkbox"/>	<input type="checkbox"/>
3.	Correctly follow applicable safety standards using an incident management system.	<input type="checkbox"/>	<input type="checkbox"/>
4.	Instructional goals achieved.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Comments:</b>

<i>Evaluator Name</i>	<i>Date</i>
<i>Evaluator Signature</i>	

<b><u>Overall Skill Sheet Result:</u></b>
Pass: <input type="checkbox"/> Fail: <input type="checkbox"/>

**Instructions: complete this form or other similar form to indicate supervision of instructors and students during a specialized training scenario, and then evaluate the instructor using the rating scale:**

## Fire Training Supervision and Instructor Evaluation

Subject:	Training Date and Times:
Instructor Name:	Instructor Level:
Evaluator Name:	Evaluator Level:

Rating Scale:

**E** – Excellent, **G** – Good, **S** – Satisfactory, **N** – Needs improvement, **NA** – Not applicable

Evaluation Areas	Rating Scale				
	E	G	S	N	NA
All safety protocols and requirements were followed using an incident management system implemented by the agency					
All appropriate safety information was given to all students prior to participation					
Equipment and facilities were in good condition and ready for use					
Instructor was well prepared for lesson					
Objectives were stated clearly					
Training Aids were used effectively					
Any unexpected events during the training were handled effectively					
Scenarios and Techniques were appropriate for the lesson					
Students had the opportunity to ask questions and be involved during the training					
Students given appropriate and timely feedback / strengths and weaknesses were identified and corrective actions implemented					
Good control over the class was maintained					
Time was managed effectively					
Comments and Recommendations:					
	<b>E</b>	<b>G</b>	<b>S</b>	<b>N</b>	
Overall Rating of Instructor					

Signature of Instructor being Evaluated: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Candidate:</b>	<b>Date:</b>
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<b>STANDARD:</b> NFPA 1041, 5.5.2	<b>SKILL AREA:</b> Develop Student Evaluation Instruments
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**TASK:** Develop student evaluation instruments given learning objectives, audience characteristics, and training goals, so that the evaluation instruments determine if the student has achieved the learning objectives, the instruments evaluate relevant performance in objective, reliable, and verifiable manner, and the evaluation instruments are bias-free to any audience or group.

**PERFORMANCE OUTCOME:** The candidate will develop student evaluation instruments, so the evaluation instruments determine if the student has achieved the learning objectives, the instruments evaluate performance in objective, reliable, and verifiable manner, and the evaluation instruments are bias-free to any audience or group. *(Evaluation instrument should cover both cognitive and psychomotor skills).*

**EQUIPMENT:** Local AHJ SOP/SOG, computer, and related forms

**CONDITIONS:** Given learning objectives, audience characteristics, and training goals, the candidate shall:

		<b>P</b>	<b>F</b>
<b>1.</b>	Develop student written and practical examinations based on learning objectives and training goals	<input type="checkbox"/>	<input type="checkbox"/>
<b>2.</b>	Provide test item analysis.	<input type="checkbox"/>	<input type="checkbox"/>
<b>3.</b>	Provide evaluation forms that are designed to evaluate performance in an objective, reliable, and verifiable manner.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Comments:</b>

<i>Evaluator Name</i>	<i>Date</i>
<i>Evaluator Signature</i>	

<b><u>Overall Skill Sheet Result:</u></b>
Pass: <input type="checkbox"/> Fail: <input type="checkbox"/>

**Task: Develop a skill evaluation sheet for a psychomotor objective. (NFPA 1041; 5.5.2)**

*Instructions:* Develop a student skill evaluation sheet for a psychomotor objective that covers all aspects of the performance skill being taught.

This sample format or other similar format may be used.

EVALUATION INFORMATION: Your form should include student name, ID number, date, and location, as applicable to your department record-keeping requirements.

LIST THE SKILL (title): Describe in the title what the student will be tested on.

*Example: "Soft-Sleeve Hydrant Hook-up"*

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BEHAVIORAL OBJECTIVE: Every skill evaluation must have the psychomotor objective that is being measured listed in the skill sheet. This provides clarity to the student and instructor on what will be performed, how it will be done, and to what degree the task will be performed.

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STUDENT INSTRUCTIONS: Briefly explain the task that the student will perform. Give details of limitations, conditions, and time frames required of the student.

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INSTRUCTOR INSTRUCTIONS: Explain to the instructor how the test is to be conducted. Detail any limitations, conditions, time frames, and so forth that the instructor should be aware of.

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LIST OF THE STEPS TO COMPLETE THE TASK/SKILL: This list consists of the step-by-step procedure of completing the task. Start with the first step in the process and end with the final objective outcome. (You may need to consult manufacturer instructions to complete this step.)

Use the task column in the following table. Expand or reduce the table to fit your skill.

RATING SYSTEM: Determine how the student will be evaluated. If using a scale or point system, provide a description of what is passing.

For a psychomotor skill, the most accepted practice is to use a pass/fail evaluation. The student must complete all steps to be successful. Other measures may help separate performances of students.

- Excellent
- Good
- Average
- Fair
- Poor/Fail

TASK	PASS	FAIL
1.		
2.		
3.		
4.		
5.		

COMMENTS: Provide a place for the instructor to comment on the student's performance. The instructor could make suggestions for improvement if the student failed the test.

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SIGNATURE OF EVALUATOR: \_\_\_\_\_

SIGNATURE OF STUDENT: \_\_\_\_\_

**Task: Develop a written evaluation instrument for course objectives. (NFPA 1041; 5.5.2)**

*Instructions:* Develop a written evaluation for lesson objectives using multiple forms of evaluation measures.

This sample format or other similar format may be used.

*Note:* The test planning sheet will be used to help plan the characteristics of your test.

1. WRITE THREE MULTIPLE CHOICE QUESTIONS: The questions should relate to the class objectives and the lesson plan. Provide directions for completing this segment.

*Example: "Choose the correct answer."*

Directions: \_\_\_\_\_

1. \_\_\_\_\_

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_

2. \_\_\_\_\_

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_

3. \_\_\_\_\_

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_

<b>Candidate:</b>	<b>Date:</b>
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<b>STANDARD:</b> NFPA 1041, 5.5.3	<b>SKILL AREA:</b> Develop Course Evaluations
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**TASK:** Develop a class evaluation instrument, given agency policy and evaluation goals, so that students have the ability to provide feedback to the instructor on instructional methods, communication techniques, learning environment, course content, and student materials.

**PERFORMANCE OUTCOME:** The candidate will develop course evaluations, so students have the ability to provide feedback to the instructor on instructional methods, communication techniques, learning environment, course content, and student materials.

**EQUIPMENT:** Local AHJ SOP/SOG, computer, and related forms

**CONDITIONS:** Given agency policy and evaluation goals, the candidate shall:

		<b>P</b>	<b>F</b>
<b>1.</b>	Develop and submit a course evaluation form that shows student has the ability to give feedback on the following:	<input type="checkbox"/>	<input type="checkbox"/>
	a) Instructional methods	<input type="checkbox"/>	<input type="checkbox"/>
	b) Communication techniques	<input type="checkbox"/>	<input type="checkbox"/>
	c) Learning environment	<input type="checkbox"/>	<input type="checkbox"/>
	d) Course content	<input type="checkbox"/>	<input type="checkbox"/>
	e) Student materials	<input type="checkbox"/>	<input type="checkbox"/>

<b>Comments:</b>

\_\_\_\_\_ *Evaluator Name*                      \_\_\_\_\_ *Date*

\_\_\_\_\_ *Evaluator Signature*

<b><u>Overall Skill Sheet Result:</u></b>
Pass: <input type="checkbox"/> Fail: <input type="checkbox"/>

**Task: Construct a course and instructor evaluation form. (NFPA 1041; 5.5.3)**

*Instructions:* Develop a course and instructor evaluation form that students can use to review the presentation using one of the example types below (see the next page to create the form):

**Survey Example:** Include instructions for student completion.

Mark your reaction by circling one of the following choices:

SA—strongly agree

A—moderately agree

D—disagree

SD—strongly disagree

SA    A    D    SD    I would take another course like this.

SA    A    D    SD    I did not learn anything from this class.

**Questionnaire Example:** Include instructions for student completion.

Was this course what you expected it to be? If no, why not?

What areas could be shortened? Entirely eliminated?

**Rating Sheet Example:** Include instructions for student completion.

Rating Scale:            5 = outstanding  
                                  4 = more than satisfactory  
                                  3 = satisfactory  
                                  2 = less than satisfactory  
                                  1 = poor

Printed materials were well organized.            5 / 4 / 3 / 2 / 1

Course was a reasonable length.                    5 / 4 / 3 / 2 / 1

Classroom contained minimal distractions.        5 / 4 / 3 / 2 / 1

## Course Evaluation Form

**Task: Construct a course and instructor evaluation form to cover all of the sections listed below, using one of the formats described on the previous page:**

**Instructional methods:**

Add one or more questions here:

**Communication techniques**

Add one or more questions here:

**Learning environment**

Add one or more questions here:

**Course content**

Add one or more questions here:

**Student materials**

Add one or more questions here:

**FIRE INSTRUCTOR II – SKILLS PROJECTS  
Documentation**

Arizona Center for Fire Service Excellence

**Candidate Name** (print clearly): \_\_\_\_\_

**Program Name** (Department or College): \_\_\_\_\_

Evaluator and Instructor attest that all skills listed in this document (Skill sheets #1 through 10) were successfully demonstrated by this candidate during the course of this program.

Evaluator and Program Instructor: This signed page must be turned in to AZCFSE for each candidate who is requesting certification for this program.

Turn in any documents or skills requested by AZCFSE in addition to this signed page.

Keep a copy of all completed and signed skill sheets for audit purposes for one year, or at least until receiving official notice from AZCFSE that all candidates have been marked complete on all skills after the final audit.

Evaluator Name \_\_\_\_\_ Evaluator Signature \_\_\_\_\_

Instructor Name \_\_\_\_\_ Instructor Signature \_\_\_\_\_

(The Instructor's signature above verifies that this candidate successfully completed all required skills in this skill packet during the training program and that certification in the Fire Instructor I prerequisite level was verified)

**Important Note** for the Program Instructor: if any skills are not complete and documented by this candidate, mark the missing skill numbers here:

**Note Incomplete skills here (skill numbers):** \_\_\_\_\_

Candidates will have one year to turn in required documentation that all skills were completed in order to be eligible for certification for this program

Proctor Name \_\_\_\_\_ Proctor Signature \_\_\_\_\_

Proctor please check one box below:

- Proctor verifies that all required documents are completed and attached to the skills packet
  - Proctor requests a final review of this Instructor I Skills Packet by AZCFSE
- (if any skills are incomplete, check this box and not the specific issues or problems found)