

Breath Test Instructor Evaluation Form

Instructor: _____ Location: _____

Topic: _____ Date: ____/____/____

	Outstanding	Acceptable	Needs Improvement	Unacceptable	Comments
1. The instructor demonstrated a thorough understanding and mastery of BATS	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
2. The instructor provided personal experience to reinforce material in a logical and organized manner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
3. The instructor used class time effectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
4. The visual aids and handouts were used effectively to enhance learning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
5. The instructor provided sufficient detail and examples to explain concepts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
6. The instructor was professional in demeanor and appearance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
7. The instructor responded effectively to students' questions in class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

	Outstanding	Acceptable	Needs Improvement	Unacceptable	Comments
Overall, I would rate the instructor as:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

Please provide written feedback (Required Item)

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