

TAPT Professional Development & Certification Program
Intern Observation Form

Intern Evaluated: _____ Date: _____

By Instructor(s): _____

Course: _____ Location: _____

This person was evaluated as: Intern 1 Intern 2

Area Observed	<i>Needs Improvement</i>	<i>Meets Expectations</i>	<i>Exceeds Expectations</i>	<i>Not Applicable</i>
1. Personal Teaching Style:	✓	✓	✓	✓
Professional Demeanor/Appearance				
Preparation/Pre-Class Communication				
Motivational/Belief System				
Knowledgeable				
Focused/Ability to Redirect				
Asks Questions/Conversational				
Reviews Often				
Communication – Verbal				
Voice Tone				
Interaction				
Pronunciation/Grammar/Word Choices				
Communication – Non-Verbal				
Facial/Gestures/Eye Contact/Stance				
Rapport with attendees/instructors				
2. Curriculum:				
On Task				
Credible/Accurate				
Handouts/ Visual Aids				
Media Facilitation/Operation				
Activities				
Testing Procedures				
3. Assisted as Needed:				

Additional comments or suggestions for improvement/commendation/recommendation: _____

Did this Intern receive the ppt presentation and other materials and assignments applicable to the level of Intern one or Two? _____

Evaluating Instructor Signature _____

Revised 1-1-2024.