##### Trainee Supervised Teach Self-Evaluation

Use a copy of this form for each Supervised Teach

Trainee Name

Class       Class Dates

Location

Supervising Instructor(s)

Number of units/hours       Number of students in class

(Attach additional sheets if necessary)

How did it go for you? What did you learn? What was challenging? Where do you need to

focus next?

Trainee Signature       Date

Reviewing Advisor Signature       Date