IdahoSTARS Trainer Observation Tool for Professional Growth and Development
Adapted from: *Gateways to Opportunity, Illinois Professional Development System*

Trainer:		Date of Training:	
Observer:		Date of Observation:	
Training Title:		Date of Review:	

INSTRUCTIONS FOR USING THIS TOOL:	1) Each competency must be rated. 2) Ratings to each competency must be supported with descriptive comments. Be sure to record exactly what was observed and heard. 3) Detail your general comments on the training/trainer delivery in the space provided at the end of this document.
COMPETENCY AREA	***ALWAYS:*** Frequently observed. ***SOMETIMES:*** Regularly observed. ***NOT YET:*** Did not observe.

Facilitating Techniques	*ALWAYS:* Frequently observed. *SOMETIMES:* Regularly observed. *NOT YET:* Did not observe.	
Speaking Trainer is able to **verbally express** thoughts clearly, articulately and coherently, avoiding vagueness and ambiguity.	**Always** **Sometimes** **Not Yet**	
Eye Contact Trainer makes **eye contact** with participants.	**Always** **Sometimes** **Not Yet**	
Directions Trainer is able to communicate **directions** in a coherent manner, avoiding vagueness and ambiguity by using a variety of techniques.	**Always** **Sometimes** **Not Yet**	
Pacing Trainer clarifies information and speaks at a rate that is easy to follow	**Always** **Sometimes** **Not Yet**	
Listening Skills Trainer enthusiastically responds to questions and comments; exhibits exceptional **listening skills** and is always open to new ideas.	**Always** **Sometimes** **Not Yet**	

Areas of Strength:

Comments/Suggestions for improvement of Presentation Skills:

Training Effectiveness	ALWAYS: Frequently observed. SOMETIMES: Regularly observed. NOT YET: Did not observe.	
Organization Trainer is well prepared for the session and has workshop materials ready and **organized**.	**Always** **Sometimes** **Not Yet**	
Knowledge Trainer demonstrates extensive **knowledge** about the subject matter and is willing to share own experiences.	**Always** **Sometimes** **Not Yet**	
Delivery Trainer **adjusts** training based on the three learning styles to meet the need of all participants.	**Always** **Sometimes** **Not Yet**	
Facilitation Trainer uses various forms of questioning to **stimulate participant involvement**.	**Always** **Sometimes** **Not Yet**	
Enthusiasm Trainer consistently exhibits **enthusiasm** for training content and for learning.	**Always** **Sometimes** **Not Yet**	

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Areas of Strength:

Comments/Suggestions for improvement of Training Effectiveness:

Instructional Planning	ALWAYS: Frequently observed. SOMETIMES: Regularly observed. NOT YET: Did not observe.	
Define Objectives Trainer thoroughly defines and explains course **objectives/key points**; refers to them during the session.	**Always** **Sometimes** **Not Yet**	
Relevant Activities & Materials Trainer uses creative, hands-on **activities** and instructional **materials** to support the delivery of session content.	**Always** **Sometimes** **Not Yet**	
Sharing Knowledge Trainer creates and capitalizes on opportunities to include **recent developments** in the field in order to keep participants informed.	**Always** **Sometimes** **Not Yet**	

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Areas of Strength:

Comments/Suggestions for improvement of Instructional Planning:

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7 of 9

Registry Observer comments/suggestions-Overall Assessment:

May discuss general observations regarding the training session. (e.g. effective use of instructional time, overall conduct, and professionalism, etc.)

[ ]

Action Plan/Goals:

[ ]

Trainer Response:

Please indicate your own assessment of the training session/workshop, and your response to the appraisal. Attach additional sheets if necessary.

The signature below indicates that the training evaluation and follow-up procedures were reviewed and discussed.

Signature of Observer:	Date:

The signature below indicates that the training evaluation and follow-up procedures were reviewed and discussed.

Signature of Trainer:	Date:

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9 of 9