



Evaluation for Individualized Module

1. IDENTIFICATION

NAME: [Click here to enter text.](#) EMPLOYEE ID#: [Click here to enter text.](#) DATE: [Click here to enter text.](#)
 SCHOOL: [Click here to enter text.](#) ASSIGNMENT: [Click here to enter text.](#)

2. MODULE IDENTIFICATION

Module Type*:

Title: [Click here to enter text.](#) Date(s): [Click here to enter text.](#)
 Location: [Click here to enter text.](#) Actual Training Time: [Click here to enter text.](#)

Completed Time Log must be attached to this form

3. **OBJECTIVE:** To improve skills/gain knowledge in the area(s) of [Click here to enter text.](#)

From the above objective, list at least 3 specific areas in which you intend to increase your skills/knowledge:

1. [Click here to enter text.](#)
2. [Click here to enter text.](#)
3. [Click here to enter text.](#)

4. **EVALUATION** The person identified above has demonstrated one or more competency(ies) gained from this experience. Based on my observation of this demonstration, I believe this person has shown a new or improved proficiency by doing the following: [Click here to enter text.](#)

Evaluator eSignature: [Click here to enter text.](#) Date: [Click here to enter text.](#)

Position: [Click here to enter text.](#)

5. DISSEMINATION OF INFORMATION (A)

I shared one or more of the following:

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| Hand Outs | <input type="checkbox"/> | Audio/Visual Resources | <input type="checkbox"/> |
| Workshop | <input type="checkbox"/> | Verbal Information | <input type="checkbox"/> |
| Demonstration | <input type="checkbox"/> | Other | <input type="checkbox"/> |
| Electronic Information | | <input type="checkbox"/> | |
| (such as websites, online resources, etc.) | | | |

DISSEMINATION OF INFORMATION (B)

I shared with a minimum of three people listed below:

1. [Click here to enter text.](#)
2. [Click here to enter text.](#)
3. [Click here to enter text.](#)

6. APPROVAL (office use only)

Professional Development Director: [Click here to enter text.](#) Date: [Click here to enter text.](#)