

Training Delivery Observation & Feedback Checklist

To be completed by an approved HBA TAE qualified observer

Name of learner	Heather Sheppard
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Information about you (the approved HBA TAE qualified observer)

Name	Silvia Koslow	
Relevant qualification/s you hold	<input checked="" type="checkbox"/>	TAE50111 or TAE50116 Diploma of Vocational Education and Training
	<input type="checkbox"/>	TAE50211 or TAE50216 Diploma of Vocational Education and Training
	<input type="checkbox"/>	Higher level qualification in adult education.
	<input type="checkbox"/>	Other (list):
What is your relationship with the learner? Tick (☑) appropriate box If other provide details of relationship, e.g. Manager	<input type="checkbox"/>	I currently work as an assessor for HBA Learning Centres
	<input checked="" type="checkbox"/>	Education Manager in Foundation College Other (describe):
Your contact details	Phone (mobile preferred)	92388294
	Email	silvia.koslow@chisholm.edu.au

Instructions for the approved HBA TAE qualified assessor


- Observe the learner delivering training to a minimum group size of 8 people. An observation checklist must be completed for each presentation required.
- Document the learner's performance by ticking 'yes', 'no', or 'NA' to each criteria listed below. Where the 'NA' column is blacked out, the criterion applies to all assessments.

Information about the assessment observed

Nature of the supervision Tick (☑) all boxes that apply	<input checked="" type="checkbox"/>	I observed the Learner—face-to-face		
	<input type="checkbox"/>	I observed the Learner—by video/recording		
	<input type="checkbox"/>	Other (describe):		
Assessment date/s	from →	5 th Dec '19	to →	

Where did the assessment take place Tick (☑) all boxes that apply	<input checked="" type="checkbox"/> Workplace
	<input type="checkbox"/> At _____ (name of location)
	<input type="checkbox"/> Not applicable—the Learner completed a portfolio of evidence and submitted it to the RTO for marking
	<input type="checkbox"/> Other (describe): _____

Criteria (did the candidate do the following?)	Yes	No	N/A
Create and promote an inclusive learning environment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customise and use fit for purpose resources effectively?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aim audio visual aids and other learning resources at the appropriate level for the course and learner group and use effectively to promote learning?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use of culturally appropriate & social sensitivities within communication skills to relate to people from diverse backgrounds and people with diverse abilities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training Delivery			
Provide clear introduction to the aims of the lessons in the context of the programme	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide clear instructions / information to a level and pace appropriate for the learner group	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrate flexibility in responding to the needs and learning requirements of each learner in a manner appropriate to their age and prior experience and LLN skill levels	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning Support Strategies			
Demonstrated the effective use of a range of learning methods appropriate to the learner group and promoting equality of opportunity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Checked on each learner regularly during the session	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide constructive feedback to the learners	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encourage and acknowledge learner contributions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employed a minimum of two (2) learning support strategies appropriate to the LLN requirements and the learner group	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Integrated specialist LLN support into training and assessment where required	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Provided additional learning support considerably and in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Criteria (did the candidate do the following?)	Yes	N o	N/ A
the context of the aims of the session	✓		
Assessment Strategies			
Selected and used a range of assessment strategies (minimum two (2) appropriate to meet individual learner needs and that allowed for a variety of responses in verbal, written and practical form	✓	<input type="checkbox"/>	<input type="checkbox"/>
Overall Feedback			
Areas of strength			
good rapport with students and well designed lesson. A fun activity			
Suggestions for improvement			
To much instruction in the beginning as students wanted to commence activity.			
Result	Satisfactory ✓		Not Satisfactory <input type="checkbox"/>
Approved HBA TAE qualified observer signature: 	Date: 5/12/19.		
Candidate's signature	Date:		

Must provide a REAL signature. If submitting your portfolio electronically, either insert an electronic signature in the space above, or print this page, sign it, then submit a scan of the signed page.