ADULT LEVEL

MINISTRY FORMATION — EVALUATION FORM Office of Religious Education Archdiocese of Los Angeles

(To be completed by the designated person evaluating the catechist-learner in a class setting)

DIRECTIONS: This form is to be given to the person evaluating the candidate for certification. We encourage both the evaluator and the candidate to study this form in order to make the process as valuable as possible. Immediately following the session the evaluator shares observations, perceptions and comments relating to the evaluation of the candidate. Both the candidate and the evaluator sign this form. *It is the candidate's responsibility*

to return it promptly to the Master Catechist Team with whom he/she is working toward certification.

NAME OF CANDIDATE BEING OBSERVED	LOCATION OF FORMATION CENTER (PARISH/CITY)										
Name of Evaluator	Parish where Observation Took Place										
Adult Ministry Program Observed	Role of Candidate Observed: Presenter & Facilitator										
THEME/GOAL OF SESSION	Facilitator of a group study/sharing in s prepared study program or presentation someone else.										
Please rate the candidate's skills in facilita	ating ar	nd/or pr	esenting	g. (1 =	lowest,	5 = higl	nest.)				
Quality of listening skills:	1	2	3	4	5						
Evidence/Example(s):											
Quality of questioning skills: Evidence/Example(s):	1	2	3	4	5						
Atmosphere conducive to adult study/disc Evidence/Example(s):			1	2	3	4	5				
Atmosphere conducive to faith sharing:		1	2	3	4	5					

Ability to handle difficulties within the group:			1	2	3		4	5	
Evidence/Example(s):									
Ability to focus the group and/or summarize content of sharing:						2	3	4	5
Evidence/Example(s):									
Organization and flow of session: 1		2	3	4	5				
Evidence/Example(s):									
Knowledge of content/preparation of session Evidence/Example(s):				1	2		3	4	5
Skill at leading prayer: 1		2	3	4	5				
Evidence/Example(s):									
Summary of overall strengths and weaknesse									
General Evaluation & Recommend	datic	on:							
At this time would you recommend this candid	date fo	r certifi	cation a	as a cat	echis	t?			
☐ Yes. ☐ Yes, with reservations.	(pleas	e elabo	orate be	elow) 🗖	l No.	(ple	ase e	explain	below)
									

7. Candidate Response:	
The candidate is welcome to make any comments/observations on the experience of their evaluation.	
Together we have shared and discussed the contents of this evaluation.	
GIGNATURE OF THE CANDIDATE	
DATE DATE	

It is the responsibility of the Candidate for Certification to return this completed form to the Master Catechist with whom he/she is working toward certification.	
