

GROUP EXERCISE LEADER DESIGNATION

Course Completion and Participant Assessment Form



Name of Participant (print name): _____

Designation Taken (Please Check One)

- Choreography Cycling Portable Equipment Step Mind/Body

Date of Course: _____ AFLCA Course #: _____

AFLCA Trainer/Course Facilitator (print name): _____

Please ensure that all information is completed, and signed by both the participant and Trainer/ Facilitator. Signatures are proof that this feedback has been discussed with the course participant by the end of the course, and verifies that the participant has completed the course.

ASSESSMENT OF COURSE PARTICIPANT

Did the course participant prepare at least one portion of a class component? ___ Yes ___ No

If yes, did the course participant lead the group through their class plan? ___ Yes ___ No

The following scale is being used to assess the course participant:

1= strongly disagree 2= disagree 3= agree 4= strongly agree

The course participant:

- _____ Was actively engaged in the learning process (eg. appeared to listen in class, asked questions, took notes, etc.)
- _____ Prepared an effective class/component lesson plan
- _____ Demonstrated an understanding of anatomy, biomechanics and physiology
- _____ Demonstrated proper alignment, technique and body awareness
- _____ Effectively worked with music tempo, mood and volume (if applicable)
- _____ Chose movements that were appropriate to the skill and fitness level of the group
- _____ Demonstrated a confident, positive and encouraging leadership style
- _____ Demonstrated a knowledge of the course material

One thing done well: _____

One thing to work on: _____

Signature of Course Participant

Date

Signature of AFLCA Trainer/Facilitator

Date