

CO-EXAM or CO-TEACH REPORT

The Lifeguarding Experts (Please complete one evaluation report for <u>each</u> co-exam or co-teach completed)

 To be completed by the Co-examiner or Co-instructor Candidate Instructions for co-examiner or co-instructor: Complete the Co-examiner or Co-instructor section and conduct the co-exam or co-teach. Review the feedback with the supervising examiner and sign the form. On completion of two successful co-exams, forward the completed co-exam reports and your completed Examiner Training record to the Lifesaving Society Office. 										
		_								
Last name		First name			,	Lifesaving Society ID#:				
()	()) (
Home phone Business phone Mobile phone E-mail address:										
To be completed by the Supervising Examiner Instructions for supervising examiner: 1. Complete this evaluation by providing clear and concise comments under each section. 2. Review feedback with co-examiner / co-instructor. 3. Sign this form to acknowledge evaluation. 4. If candidate is successful sign the candidate's Training Record. If unsuccessful, do not sign the Training Record.										
L and many		Einst a sure								
Last name	(First name			(Lifesaving S				
	()			()				
Home phone: E-mail address:	Bu	siness phone			Mobile phone					
E-IIIdii duuless:										
How many exams have you	conducted at this level	2 0	□ 1	-4	5-9	□ 10+				
Exam or course details										
Level examined/taught				# exa	amined	i	# passed			
Date of exam/course										
	vear / month / day	Location of ex	(am/course	N	ame of facility		City			
year / month / day Location of exam/course Name of facility City Please indicate and give specific comments on the areas in which the co-examiner/co-instructor actively prepared and participated before, during and after the exam or course. City										
□ Resuscitation □ Rescues □ Spinals □ First Aid □ Skill evaluation □ Final Evaluation										
□ Other (please specify):										
Communication and Tea	aching		Excellent	Good	Satisfactory	Unsatisfac	ctory N/A			
1. Co-examiner/co-teache	er communicates well v	ith candidates.								
2. Offers constructive feedback to candidates										
3. Uses exam/course out										
Comments:										
70 Melissa St, Fredericton, NB, E3A 6W1 Tel: 506-455-5762 Email: info@lifesavingnb.ca www.lifesavingnb.ca										

Co-exam or Co-teach Report

Evaluation, Knowledge and Resources		Ex	cellent	ellent Good Satisfactory		Unsatisfactory N/A		N/A		
1.	Applies <i>Must Sees</i> .									
2.	Records performance	of candidates.								
3.	Use of teaching manua	aching manual/award guide during exam								
4.	Ability to plan and evaluate rescue situations									
5.	Played role in notificati	on of successful/unsuccess	sful candidates.]			
Con	nments:									
										N 1/A
	Leadership			cellent	Goo		,	Unsatisfa	ctory	N/A
1.	Had a good rapport wit									
2.		resented the Lifesaving Society in a professional manner.								
	3. Prepared to assist with the exam / course.]			
Con	nments:									
Saf	ety		Ex	cellent	Goo	d Satisfa	Satisfactory Unsatisfacto		ctory	N/A
1.	Conducted in a safe er	nvironment.]			
2.	Aware of entire class.]			
3.	3. Gain knowledge of relevant health issues.]			
Con	Comments:									
Fin	al Recommendation									
		candidate continue their tra	inina							
		ninations/co-teaching.	ining.							
 Take a more active role in the preparation and planning before, during and after the exam/course. 										
I recommend this candidate for appointment as an Examiner. In my judgement, he or she possesses the knowledge, ability, teaching and communication										
skills, good understanding of the standards and the leadership abilities to conduct an exam or course.										
Con	nments:									
	LIDATION									
Leve	el examined or taught	or taught				# examined			# passed	
Date	Date of exam or course Location of ex		Location of exam/co	am/course						
year / month / day			Name of facility				City			
				port and the results of the evaluation were discussed between the Supervising						
Examiner and the Co-examiner or Co-instructor candidate.										
Co-examiner or Co-instructor name			Signature				Da	Date		
Supervising Examiner name				Signature				Da	Date	