

Instructor Candidate Evaluation Form



AMERICAN CANOE ASSOCIATION
Kayak & Canoe Recreation

Safety Education & Instruction
540-907-4460
sei@americancanoe.org
www.americancanoe.org

Name: _____ ACA #: _____

Course: _____

Course Dates: _____

Venue / Conditions: _____

Instructor Trainer Note: Please either use this generic form or your own form/method to evaluate Instructor Candidates during an ICW. Please provide the ACA National Office with a copy of each Instructor Candidates evaluation along with the Certification Course Report form, especially if they were 'continued' or 'failed'.

Formal Teaching Topics:

Impromptu Teaching Topics:

Overall Teaching Ability (including strokes, maneuvers, & rescues):

Paddling Ability (Strokes & Maneuvers) in appropriate venue(s) / conditions:

Demonstration Quality (Strokes & Maneuvers) in appropriate venue(s) / conditions:

Rescue Ability:

Safety Awareness, Group Management, Leadership & Judgment:

Interpersonal Skills:

Additional Comments:

Final Certification(s):

(Please remember both tandem and solo canoe certifications if applicable.)

Level _____	Pass	Continued	Fail
Level _____	Pass	Continued	Fail
Level _____	Pass	Continued	Fail
Level _____	Pass	Continued	Fail

**If an Instructor Candidate is 'continued' at any level, please also complete and submit the attached Instructor Candidate Continuation Form.*

Instructor Trainer Signature: _____ Date: _____

Instructor Trainer Printed Name: _____



Instructor Candidate Continuation Form

Name: _____ ACA #: _____

*If an Instructor Candidate was continued at any level during an ICE, please complete and submit this form.
For example: if it was a Level 1 Certification Course and they were continued; or if it was a Level 3
Certification Course and they received a Level 2 certification, but were continued at Level 3.*

Continued at Level _____

- Please list the deficiencies observed, along with any pertinent comments:
(please use the back or additional pages if necessary)

- If applicable, please briefly outline any remediation plan developed between the continued Instructor Candidate and the Instructor Trainer. *(please use the back or additional pages if necessary)*

Instructor Trainer Signature: _____ Date: _____

Instructor Trainer Printed Name: _____

Please return a signed copy of this form to the ACA's Safety Education & Instruction Department.

www.americancanoe.org