



**CLASS SERIES AUDIT FORM**  
**ICEA Doula Certification Program**

Instructor's Name \_\_\_\_\_

Candidate \_\_\_\_\_

Address \_\_\_\_\_

ID # \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Use one form per class series.**

**PART I**

Please check ALL that apply

1. What was the atmosphere during class series?  
Are the parents:  
 Excited, stimulated  
 Interested  
 Restless, bored  
 Confused  
 Hostile, anxious  
 Withdrawn
2. The pace of the class series was:  
 Slow and tedious  
 Adequate  
 Stimulating  
 Brisk, challenging  
 Frantic, frustrating  
 Repetitious
3. The tone of the class as a group was:  
 Attentive  
 Talkative  
 Shy  
 Noisy  
 Relaxed  
 Ill at ease
4. Teaching techniques used by the educator were:  
 Lecture  
 Lecture/discussion  
 Guided discussion  
 Buzz groups  
 Role play  
 Demonstration/return demonstration  
 Other:
5. How well did the educator appear to be prepared?  
 Not at all  
 Insufficient  
 Adequate  
 Well-prepared  
 Outstanding
6. How familiar did the educator seem with the material?  
 Familiar with notes  
 Dependent on notes  
 Does not use notes  
 Needs to refer to notes more often  
 Answers questions adequately

**PART II**

- |     |    |  |
|-----|----|--|
| Yes | No | 1. Was the educator neatly dressed?  |
| Yes | No | 2. Was the educator well groomed?  |
| Yes | No | 3. Did the educator sit/stand where everyone could hear?   |
| Yes | No | 4. Did the educator sit/stand where everyone could see?  |
| Yes | No | 5. Did the educator make an effort to physically draw the group together? (i.e., ask couples to move closer, rearrange chairs, sit on floor) |

PART III

List the audiovisual aids used in this class series:

1. Describe the appropriateness of the aids to the material being covered:
2. Could the parents see and/or hear the aids when used?
3. Did the aids enhance or detract from the material being presented?
4. Could the aids have been used more effectively? How?

PART IV

Describe any content areas that were unclear:

Describe any content areas that were especially clear:

Summarize the areas where improvement is needed:

Summarize the educator's areas of strength:

Describe the classroom environment (e.g., lighting, temperature, cleanliness, space)

Title of Class \_\_\_\_\_ Date of class series \_\_\_\_\_

Class Instructor's Signature \_\_\_\_\_ Date \_\_\_\_\_