

OTPF LifeSkills Training: Grades 5/6 Facilitator Fidelity Checklist

Grantee Name										Class ID									
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Teacher										Which grades are participating in this class?					Grade Grade Grade Period				
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Instructions: Please complete the appropriate section after completion of each session. Indicate the date the session was completed, how many minutes were spent on covering that session, and indicate which of the session objectives were completed. If any session objectives were not completed, please explain why. In the notes section at the end of the survey, please include any comments you have about any session including changes you may have made to the curriculum materials.

SESSION	DATE COMPLETED		TOPICS/ACTIVITIES COVERED		CURRICULUM ATTAINMENT
	TIME TO COMPLETE (MIN)		Yes	No	
Session 1: Self-Esteem	Date Completed	Minutes	<input type="checkbox"/>	<input type="checkbox"/>	How closely did you keep to the curriculum as written for this lesson? <input type="checkbox"/> Not at all close <input type="checkbox"/> Somewhat close <input type="checkbox"/> Pretty close <input type="checkbox"/> Exactly
	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	



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SESSION	DATE COMPLETED TIME TO COMPLETE (MIN)		TOPICS/ACTIVITIES COVERED		CURRICULUM ATTAINMENT	
	Date Completed	Minutes	Yes	No		
Session 2: Making Decisions	Date Completed <input type="text"/> / <input type="text"/> / <input type="text"/>	Minutes <input type="text"/> <input type="text"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Introduction Review 3 Step Method of Decision Making <i>Group Discussion Making Practice (WS4)</i> <i>Journal Topics (WS5)</i> Session Summary	How closely did you keep to the curriculum as written for this lesson? <input type="checkbox"/> Not at all close <input type="checkbox"/> Somewhat close <input type="checkbox"/> Pretty close <input type="checkbox"/> Exactly
Session 3: Smoking Information	Date Completed <input type="text"/> / <input type="text"/> / <input type="text"/>	Minutes <input type="text"/> <input type="text"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Introduction Tobacco Demonstration #1 & Discussion Tobacco Demonstration #2 & Discussion Review Negative Effects of Smoking Discuss Social Acceptance of Smoking <i>Anti-Tobacco Laws (WS6)</i> <i>Journal Topic (WS7)</i> Session Summary	How closely did you keep to the curriculum as written for this lesson? <input type="checkbox"/> Not at all close <input type="checkbox"/> Somewhat close <input type="checkbox"/> Pretty close <input type="checkbox"/> Exactly
Session 4: Advertising	Date Completed <input type="text"/> / <input type="text"/> / <input type="text"/>	Minutes <input type="text"/> <input type="text"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Introduction Define and Discuss "Consumer" Discuss the Purpose of Advertising Brainstorm Locations of Advertisements (WS8) Define and Discuss "Target Marketing" Review Advertisers Tricky Techniques <i>Creating a Healthy Product (WS9)</i> <i>Journal Topic (WS10)</i> Session Summary	How closely did you keep to the curriculum as written for this lesson? <input type="checkbox"/> Not at all close <input type="checkbox"/> Somewhat close <input type="checkbox"/> Pretty close <input type="checkbox"/> Exactly
Session 5: Dealing With Stress	Date Completed <input type="text"/> / <input type="text"/> / <input type="text"/>	Minutes <input type="text"/> <input type="text"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Introduction Define stress, stressor, eustress, & distress <i>Stress Through the Ages (WS11)</i> Share Ideas from Stress Through Ages WS Discuss Time Wasting <i>Spare Time (WS12)</i> <i>Time Management Calendar (WS13)</i> Review Study Skills & Test Taking Techniques <i>Journal Topic (WS14)</i> Session Summary	How closely did you keep to the curriculum as written for this lesson? <input type="checkbox"/> Not at all close <input type="checkbox"/> Somewhat close <input type="checkbox"/> Pretty close <input type="checkbox"/> Exactly
Session 6: Communication Skills	Date Completed <input type="text"/> / <input type="text"/> / <input type="text"/>	Minutes <input type="text"/> <input type="text"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Introduction Define & Discuss "Communication" Define & Discuss "Active and Passive Listening" <i>Passive Listening (WS15)</i> <i>Active Listening (WS16)</i> <i>Journal Topic (WS17)</i> Session Summary	How closely did you keep to the curriculum as written for this lesson? <input type="checkbox"/> Not at all close <input type="checkbox"/> Somewhat close <input type="checkbox"/> Pretty close <input type="checkbox"/> Exactly



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SESSION	DATE COMPLETED TIME TO COMPLETE (MIN)	Yes	No	TOPICS/ACTIVITIES COVERED	CURRICULUM ATTAINMENT
Session 7: Social Skills	Date Completed <input type="text"/> / <input type="text"/> / <input type="text"/> Minutes <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Introduction <input type="checkbox"/> Define & Discuss "Conflict Resolution" <input type="checkbox"/> Conflict Styles <input type="checkbox"/> <i>Conflict-Resolution Activity (WS18)</i> <input type="checkbox"/> Discuss 3 Conflict Outcomes <input type="checkbox"/> <i>Outcome Scenarios (WS19)</i> <input type="checkbox"/> <i>Journal Topic (WS20)</i> <input type="checkbox"/> Session Summary	How closely did you keep to the curriculum as written for this lesson? <input type="checkbox"/> Not at all close <input type="checkbox"/> Somewhat close <input type="checkbox"/> Pretty close <input type="checkbox"/> Exactly
Session 8: Assertiveness	Date Completed <input type="text"/> / <input type="text"/> / <input type="text"/> Minutes <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Introduction <input type="checkbox"/> Passive, Aggressive & Assertive Behavior <input type="checkbox"/> <i>Passive, Aggressive & Assertive Behavior (WS 21)</i> <input type="checkbox"/> Practice Exercise #1: Passive, Aggressive & Assertive Responses (WS22) <input type="checkbox"/> Practice Exercise #2: Passive, Aggressive & Assertive Role-playing <input type="checkbox"/> <i>Journal Topic (WS23)</i> <input type="checkbox"/> Session Summary	How closely did you keep to the curriculum as written for this lesson? <input type="checkbox"/> Not at all close <input type="checkbox"/> Somewhat close <input type="checkbox"/> Pretty close <input type="checkbox"/> Exactly

Notes: _____
