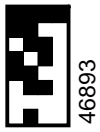


OTPF LifeSkills Training: Middle School Year 1 (6th/7th) Facilitator Fidelity Checklist

Grantee Name										Class ID				
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Facilitator First Name					Facilitator Last Name					Facilitator Sex				
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Facilitator Phone					Facilitator E-mail									
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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-Image and Self-Improvement	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"/>	

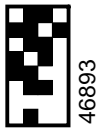


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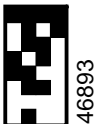
SESSION	DATE COMPLETED TIME TO COMPLETE (MIN)		TOPICS/ACTIVITIES COVERED		CURRICULUM ATTAINMENT
	Date Completed	Minutes	Yes	No	
Session 2: Macking Decisions	Date Completed □□ / □□ / □□	Minutes □□□	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<i>Everyday Decisions (WS4)</i> <i>3 C's of Effective Decision Making</i> <i>Putting the 3 C's into Practice (WS5)</i> <i>My Decision Makig Planner (WS6)</i> Group Conformity Experiment 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 Myths and Realities	Date Completed □□ / □□ / □□	Minutes □□□	<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"/>	<i>Who's Using Drugs (WS7)</i> Smoking Prevalence Smoking Myths and Realities The Cost of Smoking Smoking and Your Body <i>My Reasons for Not Smoking (WS8)</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: Smoking and Biofeedback	Date Completed □□ / □□ / □□	Minutes □□□	<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"/>	Long-term Effects of Smoking How to Take Someone's Pulse Class Experiment 1 Class Experiment 2 Smoking Word Puzzle 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: Alcohol: Myths and Realities	Date Completed □□ / □□ / □□	Minutes □□□	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Behavioral Effects of Alcohol Reasons Why Some People Become Problem Drinkers <i>My Reasons for Not Drinking (WS9)</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: Marijuana: Myths and Realities	Date Completed □□ / □□ / □□	Minutes □□□	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Prevalence of Marijuana Use Pros and Cons of Smoking Marijuana Marijuana and Other Drugs <i>My Reasons for Not Smoking Marijuana (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 7: Advertising	Date Completed □□ / □□ / □□	Minutes □□□	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<i>Practice Analyzing Ads (WS11)</i> <i>Practice Analyzing Alcohol and Tobacco Ads (WS12)</i> Counterarguements to T&A Ads 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)	TOPICS/ACTIVITIES COVERED	CURRICULUM ATTAINMENT
		Yes No	
Session 8: Violence and the Media	Date Completed [] [] / [] [] / [] [] Minutes [] [] [] []	<input type="checkbox"/> <input type="checkbox"/> <i>Watching TV (WS13)</i> <input type="checkbox"/> <input type="checkbox"/> <i>Reality Checks (WS14)</i> <input type="checkbox"/> <input type="checkbox"/> <i>Session Summary</i>	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 9: Coping with Anxiety	Date Completed [] [] / [] [] / [] [] Minutes [] [] [] []	<input type="checkbox"/> <input type="checkbox"/> <i>Anxiety Experiment</i> <input type="checkbox"/> <input type="checkbox"/> <i>Identification of Anxiety Signs</i> <input type="checkbox"/> <input type="checkbox"/> <i>Situations Making Me Feel Nervous (WS15)</i> <input type="checkbox"/> <input type="checkbox"/> <i>Rating How Anxious You Feel (WS16)</i> <input type="checkbox"/> <input type="checkbox"/> <i>How to Decrease Your Anxiety: Demonstration of Techniques</i> <input type="checkbox"/> <input type="checkbox"/> <i>Relaxation Tape</i> <input type="checkbox"/> <input type="checkbox"/> <i>Session Summary</i>	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 10: Coping and Anger	Date Completed [] [] / [] [] / [] [] Minutes [] [] [] []	<input type="checkbox"/> <input type="checkbox"/> <i>What Really Bugs Me (WS17)</i> <input type="checkbox"/> <input type="checkbox"/> <i>Techniques for Controlling Anger</i> <input type="checkbox"/> <input type="checkbox"/> <i>Session Summary</i>	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 11: Communication Skills	Date Completed [] [] / [] [] / [] [] Minutes [] [] [] []	<input type="checkbox"/> <input type="checkbox"/> <i>Telephone Game</i> <input type="checkbox"/> <input type="checkbox"/> <i>Communication Activity</i> <input type="checkbox"/> <input type="checkbox"/> <i>Recent Misunderstandings (WS18)</i> <input type="checkbox"/> <input type="checkbox"/> <i>Skills for Avoiding Misunderstandings</i> <input type="checkbox"/> <input type="checkbox"/> <i>Practice Applying Comm Skills (WS19)</i> <input type="checkbox"/> <input type="checkbox"/> <i>The Value of Asking Questions Activity</i> <input type="checkbox"/> <input type="checkbox"/> <i>Session Summary</i>	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 12: Social Skills (A)	Date Completed [] [] / [] [] / [] [] Minutes [] [] [] []	<input type="checkbox"/> <input type="checkbox"/> <i>Getting Over Being Shy</i> <input type="checkbox"/> <input type="checkbox"/> <i>Conversational Skills Activity: Tennis Ball Toss</i> <input type="checkbox"/> <input type="checkbox"/> <i>Developing Social Skills Scripts (WS20)</i> <input type="checkbox"/> <input type="checkbox"/> <i>Social Activities (WS21)</i> <input type="checkbox"/> <input type="checkbox"/> <i>Session Summary</i>	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 13: Social Skills (B)	Date Completed [] [] / [] [] / [] [] Minutes [] [] [] []	<input type="checkbox"/> <input type="checkbox"/> <i>Social Activities (WS21)</i> <input type="checkbox"/> <input type="checkbox"/> <i>Group Brainstorming of Social Activities</i> <input type="checkbox"/> <input type="checkbox"/> <i>Develop/Rate "Social Scripts" for Asking Someone Out</i> <input type="checkbox"/> <input type="checkbox"/> <i>Asking Someone Out and Being Asked Out</i> <input type="checkbox"/> <input type="checkbox"/> <i>Session Summary</i>	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

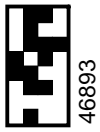


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SESSION	DATE COMPLETED TIME TO COMPLETE (MIN)	TOPICS/ACTIVITIES COVERED Yes No	CURRICULUM ATTAINMENT																								
Session 14: Assertiveness	Date Completed <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> Minutes <input type="text"/> <input type="text"/> <input type="text"/>	<table style="width: 100%; border: none;"> <tr> <td style="width: 5%;"><input type="checkbox"/></td> <td style="width: 5%;"><input type="checkbox"/></td> <td style="border: none;"><i>Handling Difficult Situations (WS22)</i></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Define Passive, Aggressive and Assertive</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Reasons for Not Being Assertive</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Benefits of Being Assertive</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>List 'High Risk' Situations</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Practice Ways of Saying 'No'</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><i>Assertive Action Plan (WS23)</i></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Session Summary</td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Handling Difficult Situations (WS22)</i>	<input type="checkbox"/>	<input type="checkbox"/>	Define Passive, Aggressive and Assertive	<input type="checkbox"/>	<input type="checkbox"/>	Reasons for Not Being Assertive	<input type="checkbox"/>	<input type="checkbox"/>	Benefits of Being Assertive	<input type="checkbox"/>	<input type="checkbox"/>	List 'High Risk' Situations	<input type="checkbox"/>	<input type="checkbox"/>	Practice Ways of Saying 'No'	<input type="checkbox"/>	<input type="checkbox"/>	<i>Assertive Action Plan (WS23)</i>	<input type="checkbox"/>	<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
<input type="checkbox"/>	<input type="checkbox"/>	<i>Handling Difficult Situations (WS22)</i>																									
<input type="checkbox"/>	<input type="checkbox"/>	Define Passive, Aggressive and Assertive																									
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<input type="checkbox"/>	<input type="checkbox"/>	<i>Assertive Action Plan (WS23)</i>																									
<input type="checkbox"/>	<input type="checkbox"/>	Session Summary																									
Session 15: Resolving Conflicts	Date Completed <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> Minutes <input type="text"/> <input type="text"/> <input type="text"/>	<table style="width: 100%; border: none;"> <tr> <td style="width: 5%;"><input type="checkbox"/></td> <td style="width: 5%;"><input type="checkbox"/></td> <td style="border: none;">Results of Reactions to Conflicts</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Behavioral Rehearsal</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Session Summary</td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	Results of Reactions to Conflicts	<input type="checkbox"/>	<input type="checkbox"/>	Behavioral Rehearsal	<input type="checkbox"/>	<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															
<input type="checkbox"/>	<input type="checkbox"/>	Results of Reactions to Conflicts																									
<input type="checkbox"/>	<input type="checkbox"/>	Behavioral Rehearsal																									
<input type="checkbox"/>	<input type="checkbox"/>	Session Summary																									

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