**CAG Peer Review**

Worksheet

**Workshop Title:**

**Reviewer Name:**

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| --- | --- |
| **Criteria** | **Yes - No - N/A** |
| The script for direct instruction is clear |  |
| **Additional Comments:** | |

|  |  |
| --- | --- |
| **Criteria** | **Yes - No - N/A** |
| There are clear directions for guided practice |  |
| **Additional Comments:** | |

|  |  |
| --- | --- |
| **Criteria** | **Yes - No - N/A** |
| There are clear directions for alone practice |  |
| **Additional Comments:** | |

|  |  |
| --- | --- |
| **Criteria** | **Yes - No - N/A** |
| Opportunities for reflection is provided |  |
| **Additional Comments:** | |

|  |  |
| --- | --- |
| **Evaluation** |  |
| How can my unit contribute to this workshop? | |
| **Additional Comments:** | |

**Reflection:**

What worked about the review process?

What didn’t work about the review process?

What are some suggestions on how we can improve the review process?