



Ministry Training Area Evaluation Form

Bible Story Teaching

Name: _____

Junior High

Senior High

Church: _____

IFCA Regional: _____

Story Title: _____ Main Text: _____

Age group / target audience: _____

<p>Organization Division Rating: _____</p> <p>(Biblically sound points; Appropriate for target audience; Does the lesson support real life application of the original truth for the target audience?)</p> <p>Comments:</p>	<p>Introduction Division Rating: _____</p> <p>(Grabs attention, Creates Interest, Engages audience)</p> <p>Comments:</p>
<p>Content Division Rating: _____</p> <p>(Points Flow; Progression of Thought; Transitions)</p> <p>Comments:</p>	<p>Delivery Division Rating: _____</p> <p>(Confidence; Vocal dynamics contained variety; Nonverbals support vocal dynamics; Was the illustrations, props & cross-references accurate & support teaching?)</p> <p>Comments:</p>
<p>Conclusion (Keystone) Division Rating: _____</p> <p>(Summarized; Kept Energy; Application by Motivate or Encouragement)</p> <p>Comments:</p>	<p>Class time Filled Division Rating: _____</p> <p>(Schedule, is the time used well; Extra material, does it support and reinforce the lesson?)</p> <p>Comments:</p>

For Administrative Use Only

Overall Division Rating: _____

Scholarship (Yes or No): _____

Evaluators Signature: _____