**Trainee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_ Shift: \_\_\_\_\_\_\_\_\_\_\_\_**

**Trainer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOR #: \_\_\_\_\_\_\_\_\_\_**

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| *Please circle the appropriate rating. (Refer to standard evaluation guides for further assistance. If no rating is given, please indicate reason by using the following:* N/A = Not ApplicableN/O = Not ObservedNRT = Not Responding To Training | **Unacceptable** | **Needs Improvement** | **Acceptable** | **Exceeds Requirements** | **Exceptional** | **No Rating** |
| **PROFESSIONALISM** |
| 1. Attendance/Punctuality
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Appearance
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Attitude toward position and coworkers
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Attitude: Acceptance of Feedback
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Attitude/Relations with public and responders
 | **1** | **2** | **3** | **4** | **5** |  |
|  |
| **KNOWLEDGE & COGNITIVE SKILLS** |
| 1. Ability to Multi-Task
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Decision Making/Problem Solving
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Accuracy in Work
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Knowledge of Policies & Procedures
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Knowledge of Geography
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Knowledge of Systems Used
 | **1** | **2** | **3** | **4** | **5** |  |
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| **CALL-TAKING TECHNIQUE** |
| 1. Voice Command
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Entry of Call Information
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Active Listening & Comprehension Skills
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Interviewing Skills
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Telephone Skills: Non-Emergency Calls
 | **1** | **2** | **3** | **4** | **5** |  |
|  | **1** | **2** | **3** | **4** | **5** |  |
|  | **1** | **2** | **3** | **4** | **5** |  |
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| **RADIO DISPATCH TECHNIQUE** |
| 1. Appropriate Terminology Use
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Speech: Speed & Tone
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Listening & Comprehension
 | **1** | **2** | **3** | **4** | **5** |  |
|  | **1** | **2** | **3** | **4** | **5** |  |
| **EMD PROTOCOLS** |
| 1. Compliance with EMD Protocols
 | **1** | **2** | **3** | **4** | **5** |  |
|  |
| **EFD PROTOCOLS** |
| 1. Compliance to EFD Protocols
 | **1** | **2** | **3** | **4** | **5** |  |
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| **GENERAL PERFORMANCE** |
| 1. Daily Forms: Completion & Accuracy
 | **1** | **2** | **3** | **4** | **5** |  |
| 1. Able to Operate Office Equipment
 | **1** | **2** | **3** | **4** | **5** |  |
|  | **1** | **2** | **3** | **4** | **5** |  |
|  | **1** | **2** | **3** | **4** | **5** |  |

***Please add comments for any area rated as Unacceptable, Needs Improvement, or NRT. Please use specific examples or include any specific call for service numbers.***

**Actual performance:**

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| **Category #** | **Rating #** | **Comments/Call Numbers/Observations** |
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| **Category #** | **Rating #** | **Comments/Call Numbers/Observations** |
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**Additional Comments:**

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*By signing you are not stating you are in agreement with what has been written, but are acknowledging that you have read through the daily observation report and understand the information contained therein.*

**Signature of Trainer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_**

**Signature of Trainee:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_\_\_\_\_