|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| U of A Division of Agriculture Research and Extension University of Arkansas System | | | | | | | | | | | |  | | | | | | | MISC-397  7-1-2006 | | | | |
|  | | | | | | | | | | | |  | | | | | | |  | | | | |
| **Program Assistant Audit Documentation** | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | |  | | | | |
| Name of Program Assistant | | | | | | | | |  | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| Random Itinerary Audit: | | | | | | | |  | | | Time: | | |  | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Family Name: | | | | | |  | | | | | | | | | Location: | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Audit Conducted: | | | | | by phone  in person | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Was the Program Assistant following their scheduled itinerary?  Yes  No | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Comments: | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Observation Visit Audit: | | | | | | | | Date: | |  | | | | | Time: |  | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Family or Group Name: | | | | | | | |  | | | | | | | | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Location: |  | | | | | | | | | | | | | |  | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | Did the Program Assistant demonstrate good understanding of the program? | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | |  | | | |
|  | Comment: | | | | | | | | | | | | | | | | | | | |  | | | |
|  |  | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | Did the Program Assistant demonstrate good teaching techniques? | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | |  | | | |
|  | Comment: | | | | | | | | | | | | | | | | | | | |  | | | |
|  |  | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Yes | No | | | | | | Did the Program Assistant demonstrate knowledge of subject matter or program curriculum? | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | | | |  | | | |
|  | Comment: | | | | | | | | | | | | | | | | | | | |  | | | |
|  |  | | | | | | | | | | | | | | | | | | | |  | | | |
|  |  | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| Agent’s Name: | | | |  | | | | | | | | |  | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | |  | | | | | | |
|  | |  | | | | | | | | | | | | | | | |  | | | | | | |
| Signature: | |  | | | | | | | | | | | | | | | | Date: | |  | |  | | |
|  | |  | | | | | | | | | | | | | | | |  | | | | | | |