

CTAS Instructor Development Checklist

To be completed jointly by CTAS Instructor Trainer and Instructor Candidate and forwarded to ctas@caep.ca before the new instructor applies to teach their first course.

INSTRUCTOR COURSE

CTAS Instructor Candidate Name: _____

CTAS Instructor Trainer Name: _____

Date of Instructor Course: _____

Instructor Candidate Approval email received from CTAS NWG on: _____

	Instructor Trainer initials	Instructor Candidate initials
All CTAS course slides and instructor notes reviewed		
Course organization reviewed (Admin Manual)		
Course application procedure reviewed (Admin Manual)		
Post Course paperwork procedure reviewed (Admin Manual)		
How to maintain Instructor status reviewed (Admin Manual)		

INSTRUCTOR CANDIDATE MONITORING

Monitored by: _____ Date: _____

Feedback Provided to Instructor Candidate:

Instructor Candidate Signature: _____

Instructor Trainer Signature: _____

CTAS NWG contact: Fax (613) 523-0190; email ctas@caep.ca

