

**MASSACHUSETTS FIRE TRAINING COUNCIL  
FIRE INSTRUCTOR II PRACTICAL CERTIFICATION EXAMINATION**

Skill Sheet No. **F I 2 – 201**

Date: **07-01-2013**

Skill Title: **Lesson plan development**

NFPA Objective: 5.3.2, 5.3.3

\* Denotes critical task

Minimum to Pass: **14 out of 20**

Candidate Name: \_\_\_\_\_ Topic: \_\_\_\_\_

**Lesson plan contains the following components.**

**Pass**

**Fail**

1. Topic.

2. Level of Instruction.

3. Time frame.

4. Materials or resources required.

\* 5. References.

6. Prerequisites (If any)

\* 7. Objective(s) - Action, Behavior, Condition, and Degree.

8. Introduction.

\* 9. Presentation- Teaching points and Instructor notes

\* 10. Application.

\* 11. Evaluation.

12. Conclusion.

**Presented in the following manner.**

\* 13. Material designed to cover a 12 – 15 minute segment of instruction.

\* 14. Lesson plan is typed, free of spelling, grammatical, or technical errors, and cleanly presented.

**Instructional aids developed as follows.**

15. Applicable to material in lesson plan.

16. Digital slides or overhead transparencies contain bullet points only.

17. Font style, size, color, and background are designed for intended audience.

18. Graphics/images are legible and relate to material being presented.

19. Use of aids is identified in lesson plan.

\* 20. Aids are typed, free of spelling, grammatical, or technical errors, and cleanly presented.



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Skill Sheet No. **F I 2 - 202**

Date: **07-01-2013**

Skill Title: **Test instrument development**

NFPA Objective: 5.3.2, 5.5.2

Minimum to Pass:

**6 out of 8**

Candidate Name: \_\_\_\_\_ Topic: \_\_\_\_\_

**Tasks**

**Pass**

**Fail**

\* 1. A minimum of 5 test questions. (multiple choice, fill-in, matching, etc.)

2. Clear directions to student how to take test.

3. Questions are clearly stated.

4. Questions are in logical order.

\* 5. Questions relate to lesson plan objectives.

\* 6. Questions are typed, free of spelling, grammatical, or technical errors, and cleanly presented.

\* 7. Answer key provided.

\* 8. Reference(s) for each question provided.

\* Denotes critical task

Task	Description of Failure

Examiner _____ Date ____/____/____	Pass ____ Fail ____
Coordinator Review _____ Date ____/____/____	Pass ____ Fail ____

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Skill Sheet No. **F I 2 - 203** Date: **07-01-2013** Skill Title: **Instructor feedback form development**

NFPA Objective: 5.3.2, 5.5.3

Minimum to Pass: **6 out of 8**

Candidate Name: \_\_\_\_\_ Topic: \_\_\_\_\_

**Tasks**

**Pass**

**Fail**

\* 1. A minimum of 5 feedback questions.

2. Clear directions to student how to complete feedback form.

3. Questions are clearly stated.

4. Questions are in logical order.

5. Questions relate to lesson.

6. Questions relate to the instructor's delivery,

7. Questions relate training environment and location.

\* 8. Questions are typed, free of spelling, grammatical, or technical errors, and cleanly presented.

\* Denotes critical task

Task	Description of Failure

Examiner _____ Date ____/____/____	Pass ____ Fail ____
Coordinator Review _____ Date ____/____/____	Pass ____ Fail ____

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Skill Sheet No. **F I 2 - 204** Date: **07-01-2013** Skill Title: **Presentation of candidate lesson plan**

NFPA Objective: 5.4.2

Minimum to Pass: **12 out of 16**

Candidate Name: \_\_\_\_\_ Topic: \_\_\_\_\_

**Tasks**

**Pass**

**Fail**

1. Appeared in appropriate dress.		
* 2. Properly utilized A/V equipment identified in the lesson plan.		
3. Corrected tripping hazard with all accessory and power cords.		
* 4. Spoke in a clear, well-modulated voice of proper volume.		
5. Speech was reasonably free of language errors. (mispronounced words)		
6. Speech was reasonably free of distracting mannerisms. (ahs, oks, etc.)		
7. Spoke to the class. (did not constantly read from notes, chart, board, etc.)		
8. Delivery was free of distractions. (pacing, jingling coins, keys, etc.)		
* 9. Delivery followed logical order of lesson plan.		
10. Audiovisuals & nonprojectables properly integrated into presentation as stated in the lesson plan.		
* 11. Information presented was technically correct.		
12. Engaged/interacted with students during presentation.		
13. Asks questions of students clearly.		
14. Followed oral instructions.		
15. Handled A/V units and accessories with due care.		
* 16. Presentation segment lasted between 12 and 15 minutes.		

\* Denotes critical skill.

Examiner _____ Date ____/____/____	Pass ____ Fail ____
Coordinator Review _____ Date ____/____/____	Pass ____ Fail ____



MASSACHUSETTS FIRE TRAINING COUNCIL

**FIRE INSTRUCTOR II CERTIFICATION**

**“STATEMENT OF ORIGINALITY”**

By my signature below, I attest that my submitted lesson plan, test instrument, and instructor feedback form is of my own creation. I also attest these documents are not those generated during my Fire Instructor II or Course Development training program conducted by the Massachusetts Firefighting Academy.

I also acknowledge that any of this documentation, created by others, and submitted under my name would be grounds for denying certification and further action as deemed necessary by the Council.

Candidate's printed name \_\_\_\_\_

Candidate's signature \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_