

Growth Bible Lesson Evaluation Sheet

(Please be detailed and specific in your comments!)

Student Name:

Lesson Taught:

Date:

Time Began:

Time Ended:

Main Teaching (Student can provide this detail before the practicum.):

Objective (Student can provide this detail before the practicum.):

Introduction (briefly summarize):

Captivated attention

Yes

No

Related to the Bible lesson

Yes

No

Comments:



Teaching for the Saved Child, Application 1

Link:

Identified the saved child

Yes

No

Main Teaching stated

Yes

No

Conduct or Main Teaching defined

Yes

No

Practical examples provided

Yes

No

Scripture used:

Comments:



Teaching for the Saved Child, Application 2 (should build on teaching from Application 1)

Link:

Identified the saved child

Yes

No

Main Teaching stated

Yes

No

Practical HELPS or STEPS provided

Yes

No

Scripture used:

Comments:



Challenge for the Saved Child

Link:

Identified the saved child	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Main Teaching stated	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Helps/Steps/Examples reviewed	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Previously used Scripture reviewed:		
“Will you?” included	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Carryover activity explained	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Comments:



Teaching for the Unsaved Child

Link:

Scripture:

Need/Way clearly explained	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Invitation for the Unsaved Child

Link:

Scripture (Condition/Promise verse):

Explained Condition/Promise	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Reviewed the Need and Way	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Made personal (using “you”)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Asked for a response	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Gave direction for counseling	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Comments:

Storytelling Techniques (briefly comment on the following)

Drama:	Suspense:
Description:	Voice:

Overall Presentation

<input type="checkbox"/> Events in order	<input type="checkbox"/> Enthusiastic
<input type="checkbox"/> Read from Bible	<input type="checkbox"/> Good knowledge of lesson
<input type="checkbox"/> Handled visuals well	<input type="checkbox"/> Good eye contact
<input type="checkbox"/> Good personal appearance	<input type="checkbox"/> Good facial expression

Words needing further explanation:

Additional comments:

Name of person observing this practicum: