

Fitness Alberta Group Exercise RECERTIFICATION



GROUP CHOREOGRAPHY PRACTICAL ASSESSMENT

NAME:		DATE of ASSESSMENT:		
Address:		City:	Prov:	
PCode:	Phone #	Email:		
Class Type & Level	:	Assessment Location:		

Please use the following scale in the observation of the Leader:

1 = needs improvement 2 = good 3 = very good 4 = excellent

LEADERSHIP COMPONENT	SCORE	NOTES
1. Introduced self as Fitness Alberta Certified Leader		
2. Arrives at least ten minutes early		
3. Organized and prepared		
4. Class format/level/goals clearly explained, gives a copy of lesson plan to assessor		
5. Flexible to group needs		
6. Faced group as much as possible, eye contact, constant observation		
7. Verbal presentation skills concise, timely, appropriate terminology, clearly heard		
8. Visual presentation skills concise, timely		
9. Motivational, encouraging, welcoming attitude conveyed		
10. Consistent safety precautions		
11. Participant feedback encouraged		
12. Provides constructive feedback		
13. Complex exercises/movements/sequences effectively broken down		
14. Appropriate class/group engagement (i.e., checking in, how are we doing?)		
15. Utilized various teaching techniques (i.e. verbal, visual, demonstration)		
16. Utilized adaptable teaching techniques		
17. Gives permission, options		
18. Evidence based education appropriate to scope of practice provided to participants		
SECTION 1 TOTAL — must score at least 47/72 in this section to pass assessment		
WARM-UP COMPONENT	SCORE	NOTES

CARDIOVASCULAR COMPONENT	SCORE	NOTES
1. Intensity/Time/Type appropriate for class type		
2. Intensity checks appropriate (method, timing)		
3. Progression of movements appropriate for class type		
4. Movements safe, controlled		
5. Postural alignment cues provided		
6. Movement variations/alternatives provided to address levels of participant ability		
7. Music phrasing, tempo, volume and mood appropriate for class		
8. Appropriate variety of movements for class type		
9. Safe/appropriate use of equipment described AND demonstrated		
10. Safe/appropriate technique described AND demonstrated		
11. Appropriate flow of movements given to address varying levels of participant ability		
12. Appropriate cool-down component (Intensity/Time/Type)		
SECTION 3 TOTAL — must score at least 32/48 in this section to pass assessment		

FLEXIBILITY/RELAXATION COMPONENT	SCORE	NOTES
-	SCORE	HOLES
1. Stretches incorporated muscles used within class		
Static stretches held for minimum 10 - 30 seconds		
3. Appropriate terminology used for muscles AND body positions		
4. Postural alignment cues provided		
5. Movement variations/alternatives provided to address levels of participant ability		
6. Music tempo, volume and mood appropriate for class		
7. Safe/appropriate use of equipment described AND demonstrated		
8. Safe/appropriate technique described AND demonstrated		
9. Correct breathing cues provided		
SECTION 4 TOTAL — must score at least 24/36 in this section to pass assessment		
STEP SPECIFIC COMPONENT (if applicable)	SCORE	NOTES
1. Safe stepping technique		
2. Balances lead leg		

2. Balances lead leg	
3. Elements of variation, avoids excessive repetition	
4. Travels in all directions	
SECTION 5 TOTAL — must score at least 11/16 in this section to pass assessment	

Please rovide details and final tallies for each Assessment area.

LEADERSHIP SCORE =				
Details:				
Requires follow-up assessment? (circle one)	YES	NO		
WARM-UP SCORE =		Duration =	mins	
Details:				
Requires follow-up assessment? (circle one)	YES	NO		
CARDIOVASCULAR SCORE =		Duration =	mins	
Details:				
Requires follow-up assessment? (circle one)	YES	NO		
FLEXIBILITY SCORE =		Duration =	mins	
Details:				
Requires follow-up assessment? (circle one)	YES	NO		
STEP SCORE (if applicable) =				
Details:				
Requires follow-up assessment? (circle one)	YES	NO		
Additional comments:				

Goals for the future:

By signing this Assessment, I, as the Fitness Alberta Leader,	, do hereby attest that I have performed today with the full intention of
providing a safe and effective exercise session/class to my p	participants, and in accordance with Fitness Alberta Performance Standards.
I accept the feedback as provided herein.	
Signature:	Date:
Print name:	
Print name:	
By signing this Practical Assessment, I, as the Fitness Albert Fitness Alberta Leader	ta Trainer/Assistant Trainer-educator, do hereby accept and acknowledge that has met the practical exam standards via competency based assessment.
By signing this Practical Assessment, I, as the Fitness Albert	has met the practical exam standards via competency based assessment.
By signing this Practical Assessment, I, as the Fitness Albert Fitness Alberta Leader	has met the practical exam standards via competency based assessment.
By signing this Practical Assessment, I, as the Fitness Albert Fitness Alberta Leader (Please check the recommendation/requirement based on t	has met the practical exam standards via competency based assessment. this Assessment).