

Facilitator's Self Assessment Tool

Select the rating that best describes your performance related to each item, and make notes to help you better reflect upon your experience and needs.

How well did I...

Create an atmosphere in which each family member felt comfortable enough to participate fully and meaningfully?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Create an atmosphere in which each educator/service provider felt comfortable enough to participate fully and meaningfully?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Demonstrate respect for each family member?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Demonstrate respect for each educator/service provider?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Help each educator/service provider clarify his or her most important concerns?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Help each family member clarify his or her most important concerns?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Balance the participation of all team members?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Support each family member's understanding of the educators'/service providers' perspectives?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Support each educator's or service provider's understanding of the family's perspectives?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Assist team members to articulate a plan for responding to future concerns about the implementation of the IEP?

1	2	3	4	5
Completely	Mostly	Somewhat	Not at all	Not Applicable

Which three things did I do that were most effective?

What would I do differently next time?

I would like to know more about. . .