



EXAMINATION SUPERVISOR'S REPORT
 (for CTA or TSTA examinations)
Form 12.7.14

Directions: Please complete this report as soon as possible after the exam and mail it immediately to the IBOC Office. Cross out inappropriate answer for YES / NO questions.

Examination: (tick: X or) **CTA** ___ **TSTA** ___

Dates of exam: _____ Location of exam: _____

Exam supervisor's name: _____

How many people were examined? _____

How many examiners were used? _____

Did you thank each examiner and helping person? **YES** ___ **NO** ___

in person? **YES** ___ **NO** ___

Do you plan to send thank-you notes? **YES** ___ **NO** ___

How long did the exam process take? _____

Did the conference committee or coordinator provide you with the necessary support for:

- Rooms for meetings? **YES** ___ **NO** ___
- Ribbons for candidates and examiners? **YES** ___ **NO** ___
- Flip charts, marking pens, and drinking water? **YES** ___ **NO** ___
- Refreshments (coffee, tea, etc.)? **YES** ___ **NO** ___
- Any necessary clerical support, e.g. photocopying? **YES** ___ **NO** ___
- Publicity about exams and need for examiners? **YES** ___ **NO** ___
- Were other activities scheduled for the day of exam? **YES** ___ **NO** ___

Did you receive any negative evaluations of examiners? **YES** ___ **NO** ___

If so give details below:

- Which people were involved? _____
- What was the complaint? _____
- _____
- _____
- How did you handle it? _____
- _____

List names of examiners (including chairs), process facilitators, supervisees, coordinator, translators: