

CLASSROOM AUDIT FORM

Commented [RT1]: The audit items on the form were identified from NAIC Continuing Education Classroom Course Recommendations guidelines, adopted 2016.

Audit Date	Audit Location		
Provider Name		Provider Number	
Course Name		Course Number	
Instructor's Name(s) & Number (PRINT)			

1. The **Course Introduction Statement** must be disseminated (orally or in writing) to all students at the beginning of the course. Was this completed? YES NO
2. Did the course begin at the time at which it was scheduled? YES NO
3. How many students were in attendance during the audit? # of students _____
4. **Did the Instructor check attendance at the beginning of the course?** YES NO
5. Did the Instructor verify attendance at the completion of the course? YES NO
6. What were the number of credit hours this course is approved for? # credits _____
7. What are the number of hours per day this course was taught (also indicate the number of breaks and duration of breaks per day)? Hours _____
Breaks _____
8. Was the approved content outline for this course followed by the Instructor? YES NO
9. Did the course cover the course materials as described (either by outline or by promotional material)? YES NO
10. Did the course end at the time at which it was scheduled? YES

Commented [RT2]: Virginia uses a course introduction statement.

Commented [RT3]: (Provider must verify the identify and license number, or NPN of all students).

NO If no, explain. _____

11. Were students paying attention while the course was conducted? YES NO

Please supply a written explanation by number on the back of this form to any **NO** responses you have checked above.

12. If any of the students arrived late, describe how the Instructor handled them as far as reporting of attendance.

13. Describe how the Instructor handled questions regarding course material.

14. Describe how the Instructor verified that students were in attendance for the entire course.

