

# FUNCTIONAL ACADEMIC SKILLS TRAINING EVALUATION REPORT

**Soldier's name** enrolled in the on-duty FAST program at the Detrick Center for Training and Education, Bldg 1520 on **enrollment date**. Regular attendance, active class participation, and an awareness of educational goals are important factors in successful completion of this program. The following information pertains to **week's date**.

## ATTENDANCE

**Hours at DCTEE this time period:**

## ACADEMIC PROGRESS

(Notes about progress, activities, needs.)

## MOTIVATION/ATTITUDE

(Instructor's comments)

**Should you have questions, comments, or concerns regarding this report, please contact the instructor at 301-619-2856 or by email.**

The student will sign the printed copy of this evaluation. \_\_\_\_\_

### Hour tally

Month			
Week	1		
	2		
	3		
	4		
	5		