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| Witness |       | Testimony Date |       |
| Court Location/ Case # |       | Laboratory Case # |       |
| Evaluator |       | Title |       |
|  | *(Please Print Name/Sign)* |  |  |  |
| Agency |       | Phone |       |
| Defendant(s) |       | Subject of Testimony |       |
| Manner of Monitoring: [ ]  Direct Observation [ ]  Video Tape [ ]  Audio Tape [ ]  Transcript Review  |

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|  |   *Rating*Excellent Average Poor |
| 1. Did the witness have a professional demeanor and appearance? [ ]  N/A
 |  [ ]  [ ]  [ ]  [ ]  [ ]  |
| 1. Was the witness well prepared for trial? [ ]  N/A
 |  [ ]  [ ]  [ ]  [ ]  [ ]  |
| 1. Did the witness effectively present the evidence? [ ]  N/A
 |  [ ]  [ ]  [ ]  [ ]  [ ]  |
| 1. Did the witness effectively describe their qualifications, duties and analysis? [ ]  N/A
 |  [ ]  [ ]  [ ]  [ ]  [ ]  |
| 1. How well did the witness convey scientific results to the jury? [ ]  N/A
 |  [ ]  [ ]  [ ]  [ ]  [ ]  |
| 1. Were you satisfied with the overall testimony? [ ]  N/A
 |  [ ]  [ ]  [ ]  [ ]  [ ]  |
| Please add any feedback from other court participants regarding the witness (such as the jury, judge, or opposing counsel).      |
| Please comment on the testimony or areas for improvement.      |

If evaluator is external to the laboratory, please email completed form to **LabQA@dps.texas.gov**

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| DPS Only | Supervisor Date  SignatureTestifying Witness Date  Signature |