

Lakota Circles of Hope Facilitator Fidelity Self-Assessment Form

Lesson 9: Brave Horses

Date: _____ Grade: 2nd Number of Students: _____ Boys _____ Girls _____

Start Time: _____ End Time: _____ Estimated Time on Task: _____

School: _____ Facilitator/Educator: _____

Please check off activities that were completed.

Activity	Completed	Facilitator	√	Youth Outcome
1. Review last lesson 2. Talking Circle & Azilya	<input type="checkbox"/>	Highlight last lesson "Mitakuye Oyasin- All My Relatives" and last week value wisdom- woksape (wo-ksa-pe)	<input type="checkbox"/>	To learn what constitutes good character in a person. All students will be able to actively participate, and take ownership inside the Medicine Wheel Circle.
	<input type="checkbox"/>	Have students form a Medicine Wheel Circle and azilya, Talk about circle protocol. Introduce today's value bravery- woohitika (wo-o-hi-ti-ka)		
3. Read "Crazy Horse's Vision"	<input type="checkbox"/>	Read story "Crazy Horse's Vision." Process with students the meaning of the story and ask questions as outlined in lesson plan.	<input type="checkbox"/>	Students will understand value of bravery.
	<input type="checkbox"/>		<input type="checkbox"/>	Students will identify good skills in resolving conflict, asserting themselves, and dealing with anger.
4. Do circle activity "Cool Off Poster & Color Horses"	<input type="checkbox"/>	Pass out workbooks and handouts.	<input type="checkbox"/>	Students will practice the Lakota value of bravery and will identify good character traits in themselves and others:
	<input type="checkbox"/>	Have students write ideas down for cooling down posters.		
	<input type="checkbox"/>	Students design their own cooling down posters and present to class.		
	<input type="checkbox"/>	Students color horses.		
	<input type="checkbox"/>	Closing: Put all materials away.		
				Students will know the steps to anger management and have an understanding of assertiveness skills and conflict resolution.

1) Were there any challenges with any of the activities? ___ Yes ___ No

Why? _____

2) Did you skip any activities? ___ Yes ___ No

Why? (e.g., group too large, had mandatory fire drill, etc.) _____

3) Which activity or activities went especially well for you?

4) Did you make any changes in this session? ___ Yes ___ No

Why? _____

5) If you made any changes how would you rate the changes?

___ **Green (Spontaneous or Minor)**

___ **Yellow**

___ **Red (Major)**

___ **Does not apply**