***You may email this form to the QA Manager brandi.barnett@alaska.gov***

Witness Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Testimony Date (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness Discipline (Firearms, DNA, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Your Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Your Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Judge\_\_\_\_ Prosecutor \_\_\_\_ Defense \_\_\_\_ Officer \_\_\_\_ Juror \_\_\_\_ Other \_\_\_\_

Court\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Defendant’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Case #\_\_\_\_\_\_\_\_

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Rate the statements below by circling a number from 1 to 5. Add comments at the bottom.

1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree

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| --- | --- | --- | --- | --- | --- |
| Witness was dressed professionally | 1 | 2 | 3 | 4 | 5 |
| Witness was prepared with documentation, notes, displays, etc. | 1 | 2 | 3 | 4 | 5 |
| Witness displayed technical knowledge of their discipline | 1 | 2 | 3 | 4 | 5 |
| Witness articulated technical information in a manner easily understood by the jury | 1 | 2 | 3 | 4 | 5 |
| COMMENTS: *We appreciate positive feedback on what we are doing right, and we encourage constructive*  *criticism of our expert testimony. Please do not relate outcomes of the trial to the effectiveness of the witness but*  *focus on their involvement and presentation of information. Thank you for assisting in monitoring our staff.* | | | | | |

For Laboratory Use Only:

Date received by Quality Assurance Manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Testifier Review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_