Observer Performance Evaluation

In an attempt to monitor the quality of observers we send on commercial fishing vessels, we would appreciate it if once the trip is completed you would take the time to fill out this questionnaire. We wish to ensure that the observers conduct themselves professionally and safely during their deployment on your vessel. Please fill in the information below and return it to the port coordinator. The information you provide is important in helping us to collect quality data that is being used for stock assessments and fishing regulations. If you are the owner of the vessel and were not present during the trip, please consult with your captain.

Vessel Name: _____   Your Name: _____

Observer Name: _____   Today's Date: _____

Your Status (check one): Captain _____   Owner _____   Other _____

Please check yes or no for each question. Additional comments can be entered on the back of this form if necessary.

Was the observer on time and prepared for the trip?   Yes ☐   No ☐

Was the observer professional, courteous, and polite?   Yes ☐   No ☐
    If NO, please explain on the back of this form.

Did the observer do anything you thought was unsafe?   Yes ☐   No ☐
    If YES, please explain on the back of this form.

Did the observer monitor one hour of every set?   Yes ☐   No ☐

Was the observer on deck for the entire time while hauling gear?   Yes ☐   No ☐
    If NO, how many sets or how much time did they miss?

Did the observer interfere with fishing operations?   Yes ☐   No ☐
    If YES, please explain on the back of this form.

Did the observer make any unreasonable requests?   Yes ☐   No ☐
(shark handling, fish sampling, food selection, etc.)
    If YES, please explain on the back of this form.

Did the observer measure fish with the meter stick?   Yes ☐   No ☐

Did the observer help with cleaning (dishes, the galley, their bunk, etc)?   Yes ☐   No ☐
    If NO, were they asked to help? Yes ☐   No ☐

If you have any other concerns or suggestions regarding this observer or the observer program, please feel free to explain them on the back of this form.

Additional Comments:

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