

Instructional Observation Form

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| **Instructor:** | **Course:** |
| **Class Day / Time:** | **Date of Observation:** |
| **Observer:** | **Observation Time:** |
| **Number of Students Registered:** | **Number of Students Attending:** |

Format: ☐ 15 weeks ☐ Blended ☐ Condensed ☐ External

Class Setting: ☐ Traditional ☐ Seminar ☐ Small Groups ☐ Online  
 ☐ Computer Lab ☐ Other Lab ☐ Clinical ☐ Virtual

Pre-Observation

Copy of Syllabus

Copies of handouts, assignments, etc. that will be used on the day of the observation

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| Topics to be covered and their relationships to Student Learning Outcomes (and rows as needed) |
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| Facets of the class for which the faculty member requests the observer’s attention (add rows as need) |
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| Rating Terms | Outstanding | Exceeds Expectations | Meets Expectations | Met with Concerns | Needs Significant Improvement | Unsatisfactory | Not Observed |
| Organization / Structure |
| Relates this class session to previous classes | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Provides overview of the day’s course content | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Demonstrates adequate preparation | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Directs student preparation for next class | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Summarizes course content covered | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Comments Click here to enter text. | | | | | | | |

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|  | Outstanding | Exceeds Expectations | Meets Expectations | Met with Concerns | Needs Significant Improvement | Unsatisfactory | Not Observed |
| Instructional Delivery / Presentation Style |
| Appropriate language use | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Clear articulation | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Demonstrates adequate preparation | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Effective use of voice: projection, modulation, etc. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Effective eye contact | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Effective body language | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Effective movement | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Rapport with students | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Comments Click here to enter text. | | | | | | | | |

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| Professionalism | | | | | | | |
| Begins class on time/greets students | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Is respectful and courteous to students | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Displays professional attitude and demeanor | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Encourages participation; gives appropriate responses | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Displays enthusiasm (for subject and student learning) | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Demonstrates professionalism in dress | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Comments | | | | | | | |

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|  | Outstanding | | | Exceeds Expectations | Meets Expectations | | | Met with Concerns | Needs Significant Improvement | | Unsatisfactory | | Not Observed |
| **Instructional Methodologies Used\*: ☐ Lecture ☐ Discussion ☐ Student Presentations ☐ Other: Click here to enter text.** | | | | | | | | | | | | | |  |  |  |  |  |  |  |
| Are the methods used appropriate to the content and level of learning? | | ☐ | ☐ | | | ☐ | ☐ | | ☐ | ☐ | | ☐ | |
| Are the students engaged? Is there evidence of learning? | | ☐ | ☐ | | | ☐ | ☐ | | ☐ | ☐ | | ☐ | |
| Comments | | | | | | | | | | | | | |

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| Use of Technology\*: ☐ Audio / Visual ☐ Internet ☐ PowerPoint ☐ Chalk / White board ☐ Other: | | | | | | | |
| Were the technologies used appropriate to the content and level of learning? | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Did the technologies used enhance student learning? Were the technologies used properly? | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Comments | | | | | | | |

\* Check all that apply

Other Classroom Observations:  
  
  
  
Summary of Classroom Observation:

Signature of Observer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.

Signature of Faculty Member  
After Discussion of Feedback: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.

Signing this form signifies receipt of it and discussion, but not necessarily agreement.