INSTRUCTIONAL OBSERVATION FORM FOR CLASSROOM AND ESL SETTINGS

Faculty Member:			
Evaluator:	 	 	
Date:	 	 	
Class:		 	

- 1. Was the lesson organized and clearly presented?
- 2. Describe the level of student interest and participation.
- 3. Describe the quality of interpersonal relations between the instructor and students.
- 4. What was particularly effective about the instruction? And, what specific suggestions would you make concerning how instruction could be improved?

Signature of Faculty Member:

Signature of Evaluator: _____

Date

Date

K:INSTRUCTIONAL OBSERVATION FORM - CLASSROOM AND ESL