

OBSERVATION SCRIPTING FORM

Attribute Coding	Time	Line Number	
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Optional Observation Supplement

Attribute IIIA3: Use of Materials/Media		Not Related	Attribute IIIC2: Procedural Questions	Attribute IIIC3: Teacher Questions	Attribute IIIC4: Students Participating
Print:			Number of Procedural Questions: _____	Factual Recall: _____	Non-Volunteers: _____ Tally _____/_____ # in class Tally
Auditory:				Comprehension: _____	
Visual:				Application: _____	
Kinesthetic/Tactile:				Analysis: _____	
Olfactory:				Synthesis: _____	
Realia/Models:				Evaluation: _____	

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Teacher _____

Assessor _____

Postobservation Conference

1. Strengths Exhibited (Minimum of two is required.)

Component/ Attribute	Comments/Commendations

2. Areas for Improvement (Minimum of two is required.)

Component/ Attribute	Comments/Activities <small>An explanation and two activities to support each area are required.</small>

3. Teacher Comments (Optional)

4. Assessor Comments (Optional)

Teacher Signature

Date

Assessor Signature

Date

Teacher's signature indicates that a Postobservation Conference has been held and does not necessarily indicate agreement.