

Teacher Evaluation Observation Template

Teacher Name: _____

Observer Name: _____ Date: _____

Subject: _____ Grade: _____ Period: _____

Classroom Observation

Criteria	Observed	Comments
Lesson Planning & Preparation		
Classroom Management		
Instructional Delivery		
Assessment & Feedback		
Student Engagement		
Differentiation		
Professionalism		

Strengths Observed

Areas for Growth

Additional Comments

Observer Signature: _____ Date: _____

Teacher Signature: _____ Date: _____