

**HAMPTON UNIVERSITY
HAMPTON, VIRGINIA
Office of the Provost
CLASSROOM OBSERVATION FORM**

Name _____ Course _____

Observer _____ Semester _____ Date _____

Directions: Rate the instructor on each item giving the highest scores for unusually effective performances. Place in the space before each statement the number that most nearly reflects your rating.

Excellent	Outstanding	Good	Fair	Poor	Not Applicable
5	4	3	2	1	NA

- | | |
|-------|-----------------------------------------------------------------------------------------------------------------------------------------|
| _____ | Objectives for this presentation were made clear to students. |
| _____ | Presentation was well planned and organized. |
| _____ | Presentation style was appropriate and effective. |
| _____ | Relevant examples, metaphors and analogies were used to establish connections with students' previous experiences and learning. |
| _____ | Class time was well used. |
| _____ | Critical thinking and analysis was modeled and encouraged. |
| _____ | Instructional techniques required a majority of students to be actively involved. |
| _____ | Respect for diverse opinions was communicated. |
| _____ | Warm, accepting, open classroom atmosphere was evident. |
| _____ | Instructor interest in information was communicated. |
| _____ | Instructor interest in student learning was communicated. |
| _____ | Instructor mastery of subject matter was clear and thorough. |
| _____ | Appropriate and effective use was made of audio-visuals, computer or other instructional technology to support presentation objectives. |
| _____ | Related easily with students. |
| _____ | Integrated information from other areas within and outside of her/his discipline. |
| _____ | Was sensitive to feelings of students. |
| _____ | Demonstrated enthusiasm for teaching and learning. |
| _____ | Discovered student misunderstandings and misconceptions. |
| _____ | Students attended to what was happening in class. |
| _____ | Moved around the classroom with ease as interacted with students. |

Date of Feedback Conference with Instructor _____

Instructor Comments:

Observer Comments:

Signature of Instructor

Signature of Observer