



State University of New York
College of Agriculture and Technology
Cobleskill, New York

Classroom Observation Form and Mentoring Guide

It is the responsibility of the individual faculty member to arrange for classroom observations in advance with the observer.

Faculty Member Observed _____ Date _____

Observer _____ Class Observed _____

Purpose of Observation

Requested for Self Improvement

Required for Reappointment/Continuing Appointment/Promotion

For each of the four categories, please comment on each item listed, then provide a statement to include any specific recommendations for improvement.

<i>Category 1: Knowledge of Subject</i>	
Demonstrated knowledge of current information on subject	
Added interpretation or evaluation of subject where appropriate	
Connected subject with related fields of interest to students	
Challenged students to think critically	

Comments: (Including specific recommendations for improvement)

Category 2: Preparation

Stated objectives for class	
Instructional materials and/or lecture showed evidence of thoughtful preparation	
Class activities well-suited to class objectives	
Illustrative examples pertinent to course and student/interest abilities	

Comments: (Including specific recommendations for improvement)

Category 3: Presentation

Communicated effectively to class	
Use of board or other appropriate technology	
Exhibited positive attitude or enthusiasm for subject/teaching	
Coped well with distractions (i.e. environment, room, equipment, class size)	
Brought class to appropriate and timely conclusion	
Assignments designed to promote learning	

Comments: (Including specific recommendations for improvement)

<i>Category 4: Interaction</i>	
Encouraged dialogue and exchanges between students when appropriate	
Exhibited good listening skills	
Displayed sensitivity in responding to student questions, answers or comments	
Answered student questions thoroughly and clearly	
Displayed flexibility as strengths/weaknesses of class revealed	
Classroom environment conducive to teaching/learning (if under instructor's control)	

Comments: (Including specific recommendations for improvement)

Summary Comments:

Signed _____ Date _____
Observer

I have read this evaluation. A statement is attached: Yes No

Signed _____ Date _____
Faculty Member