**Faculty Observation Report**

*To allow for the best assessment and reflection, please complete this form after the observation. Please use the Classroom Observation Organizer (NOT to be shared with the faculty member) during the actual class session.*

|  |  |
| --- | --- |
| **Instructor** | Click here to enter text. |
| **Department** | Click here to enter text. |
| **Course Title** | Click here to enter text. |
| **Semester & Year** | Click here to enter text. |
| **Observer** | Click here to enter text. |
| **Date & Time of Visit** | Click here to enter text. |
| **Number of Students Present** | Click here to enter text. |
| **Location & Room No.** | Click here to enter text. |

Observer: The following scale applies to each category within the report and should reflect to what extent the instructor demonstrates each behavior.

|  |  |  |
| --- | --- | --- |
| **AW** | Accomplished Well | No recommendations for improvement |
| **A** | Accomplished | Minor improvements are recommended. |
| **ND** | Needs Development | Instructor attempted to do this, but development/revision is necessary. |
| **NSD** | Needs Significant Development | Instructor did not do this and should consider adding. |
| **DNO** | Did Not Observe | Observer was not in the class for the entire lecture, or it’s not applicable. |

1. **Learning Organization and Management**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **DNO** | **NSD** | **ND** | **A** | **AW** |
| 1. Presented a well-prepared lesson in a systematic and organized fashion
 |[ ] [ ] [ ] [ ] [ ]
| 1. Clearly explained the learning objectives for the class session
 |[ ] [ ] [ ] [ ] [ ]
| 1. Summarized the major points
 |[ ] [ ] [ ] [ ] [ ]
| 1. Noticed when a student or students were not engaged and took action to involve the student/s in the class activity
 |[ ] [ ] [ ] [ ] [ ]
| 1. Solved or otherwise dealt with behavioral issues
 |[ ] [ ] [ ] [ ] [ ]

 **Comments:** Click here to enter text.

1. **Knowledge of Subject Matter**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **DNO** | **NSD** | **ND** | **A** | **AW** |
| 1. Explained concepts clearly
 |[ ] [ ] [ ] [ ] [ ]
| 1. Demonstrated command of subject matter
 |[ ] [ ] [ ] [ ] [ ]
| 1. Gave relevant examples to illustrate concepts
 |[ ] [ ] [ ] [ ] [ ]
| 1. Responded to student questions accurately
 |[ ] [ ] [ ] [ ] [ ]

 **Comments:** Click here to enter text.

1. **Teaching Style**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **DNO** | **NSD** | **ND** | **A** | **AW** |
| 1. Spoke clearly and audibly
 |[ ] [ ] [ ] [ ] [ ]
| 1. Showed enthusiasm for the subject matter and teaching
 |[ ] [ ] [ ] [ ] [ ]
| 1. Encouraged student questions and participation
 |[ ] [ ] [ ] [ ] [ ]
| 1. Interacted with individual students effectively
 |[ ] [ ] [ ] [ ] [ ]
| 1. Determined student understanding of the material
 |[ ] [ ] [ ] [ ] [ ]
| 1. Promoted critical thinking through approach and materials
 |[ ] [ ] [ ] [ ] [ ]
| 1. Emphasized relationships between key concepts
 |[ ] [ ] [ ] [ ] [ ]
| 1. Established an appropriate balance between lecture, discussion, and active and collaborative learning
 |[ ] [ ] [ ] [ ] [ ]
| 1. Used effective and appropriate technology
 |[ ] [ ] [ ] [ ] [ ]

 **Comments:** Click here to enter text.

1. **Critical Thinking**

**How did the instructor model and foster practices and strategies to help learners move beyond factual information to higher-level reasoning skills, such as analysis, application, creativity, and recognition of boundaries?**

Click here to enter text.

1. **Diversity, Equity, and Inclusion**

**Considering the diversity of the CSCC student population, what does the instructor do to help create a more inclusive and equitable learning environment for students in this course, and/or how does the course content address diversity, inclusion, and equity issues?**

Click here to enter text.

**6. Department-Specific Criteria**

Click here to enter text.

**Overall Summary**

**Strengths:**

Click here to enter text.

**Opportunities for Continued Development:**

Click here to enter text.

**Instructor Comments**

Click here to enter text.

**Signatures**

Faculty Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.

Observer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.

Chairperson: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click here to enter a date.