

Student Observation (to be completed by qualified personnel)

Student _____ Grade _____ Date _____

School _____ Teacher _____

Name of Referring Teacher or Parent/Guardian _____

Name & Title of Observer _____

Circumstances of Observation (subject, teacher, time of day, reason for observation, etc.)

A. Compare this student's performance with that of the majority of other students in the class.

- | | | | |
|--|--|--|---|
| 1. How the student works | <input type="checkbox"/> more slowly | <input type="checkbox"/> more quickly | <input type="checkbox"/> about the same |
| 2. Focus and attention span | <input type="checkbox"/> better | <input type="checkbox"/> poorer | <input type="checkbox"/> about average |
| 3. Activity level of the student | <input type="checkbox"/> more active | <input type="checkbox"/> less active | <input type="checkbox"/> about the same |
| 4. Language skills | <input type="checkbox"/> better | <input type="checkbox"/> poorer | <input type="checkbox"/> about average |
| 5. Demonstration of interest | <input type="checkbox"/> disinterested | <input type="checkbox"/> very interested | <input type="checkbox"/> about average |
| 6. Subject matter difficulty/frustration | <input type="checkbox"/> high | <input type="checkbox"/> low | <input type="checkbox"/> about average |
| 7. Emotional/social maturity | <input type="checkbox"/> less than | <input type="checkbox"/> greater than | <input type="checkbox"/> about average |
| 8. Other (specify) _____ | | | |

B. Teacher Behavior Observed: Check all that apply.

- Teaching Methods Observed:* visual large group one-to-one
 auditory small group peer
 other (specify) _____
- Conceptual Content:* concrete abstract both
- Behavior Reinforcement:* positive ignored isolation
 negative
 other (specify) _____

Teacher's Style

- | | | | | |
|---|---------------------------------------|-------------------------------------|---|-------------------------------------|
| 1. How much movement/activity is allowed? | <input type="checkbox"/> a great deal | <input type="checkbox"/> some | <input type="checkbox"/> minimal | <input type="checkbox"/> none |
| 2. How much talking/noise is tolerated? | <input type="checkbox"/> a great deal | <input type="checkbox"/> some | <input type="checkbox"/> minimal | <input type="checkbox"/> none |
| 3. What type(s) of feedback were given? | <input type="checkbox"/> praise | <input type="checkbox"/> criticism | <input type="checkbox"/> reward | <input type="checkbox"/> punishment |
| 4. What tone/manner was used to communicate? | | <input type="checkbox"/> supportive | <input type="checkbox"/> matter-of-fact | <input type="checkbox"/> harsh |
| 5. During this observation, how did the teacher spend most of his or her time? (e.g. at the board, with a small group, at the teachers' desk, circulating among students at work ...) | | | | |
| _____ | | | | |
| 6. What, if anything, about the teacher or classroom seemed to have a positive or negative effect on the students in general, or on this student in particular? | | | | |
| _____ | | | | |

