

TEACHER PERFORMANCE APPRAISAL FORM

Date: _____
 Teacher's name : _____
 Class handled : _____
 Subject specialization: _____
 Subject handled: _____

Rating Key: 4 Very good
 3 Good
 2 Average
 1 Below average
 0 Unsatisfactory

	Teacher's skill/attribute	Rating
1	Communicational clarity	
2	Listing of clear, realistic objectives attainable by children	
3	Chalkboard work	
4	Teacher pupil interaction that makes the lesson concept interesting to children	
5	Appropriate eliciting strategies (such as brainstorming, group discussion and pupil initiated questioning) based on pupils' experiences	
6	Usage of whole class demos with teaching aids	
7	Use of group activities (with clear expectations)	
8	Explanation of lesson concepts by using contextually relevant and concrete teaching learning materials (If this is not possible, use of multimedia teaching aids)	
9	Review of lesson concept using an effective Q A session (teacher initiated, pupil initiated or both)	
10	Maintenance of Classroom discipline	
11	Effective preparation and implementation of schemes Of Work *	
12	Effective preparation and implementation of Lesson plan *	
13	Marking of Class work (with teacher explanation)	
14	Marking of Home work (with teacher explanation)	
15	Remedial work	
16	Maintaining wall display of pupils' work	
17	Gender equity in all classroom processes	
18	Being sensitive to pupils' cognitive and emotional needs	
19	Maintenance of mark registers: Promptness, correctness and neatness	
20	40 minute time management (Segmentation)	

Total score: _____

[* These can be filled in the light of both classroom processes and the respective documents].

Strong points about the teacher:

Issues that require improvement:

Suggestions for improvement:

Date:

Signature of Academic Supervisor/Mentor:

Signature of Principal/Deputy Principal with his comments/suggestions:

Signature of Inspecting Officer (from District/Regional Department of Education etc) with his comments/suggestions:

Teacher's feedback and signature: