

# Classroom Observation Form PDF

## Observer Information:

- Name: \_\_\_\_\_
- Date: \_\_\_\_\_
- Time: \_\_\_\_\_
- Subject: \_\_\_\_\_

## Teacher Information:

- Name: \_\_\_\_\_
- Grade Level: \_\_\_\_\_

## Classroom Environment:

- Seating Arrangement: \_\_\_\_\_
- Classroom Decor: \_\_\_\_\_
- Technology Use: \_\_\_\_\_

## Lesson Overview:

- Topic: \_\_\_\_\_
- Objectives: \_\_\_\_\_
- Materials Used: \_\_\_\_\_

## Student Engagement:

- Were students actively participating?  Yes  No
- Did students ask questions?  Yes  No
- Were students on task?  Yes  No

## Teaching Methods:

- Lecture
- Group Work
- Hands-on Activities

- Discussions [ ]

**Assessment Methods:**

- Quizzes [ ]
- Observations [ ]
- Homework [ ]
- Projects [ ]

**Strengths:**

---

---

**Areas for Improvement:**

---

---

**Additional Comments:**

---

---

**Observer Signature:**

---

---