**Peer Lesson Observation Form**

**Lesson Details
Teacher Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Lesson Title/Topic: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Class Grade/Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date of Observation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Observation Focus Areas**

1. **Clarity of Lesson Objectives**
2. **Effectiveness of Instruction**
3. **Student Engagement and Participation**

**Evaluation Table**

| **Lesson Component** | **Strengths** | **Areas for Improvement** |
| --- | --- | --- |
| **Introduction** |  |  |
| **Main Instruction** |  |  |
| **Student Activities** |  |  |
| **Use of Materials** |  |  |
| **Closure and Wrap-Up** |  |  |

**Recommendations:**

**Acknowledgment
☐ I confirm that the feedback provided is accurate and intended for professional development.**

**Observer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**