**Preschool Teacher Assessment Form**

**Teacher’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Class/Group Managed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Assessment Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Assessment Table:**

| **Criteria** | **Excellent** | **Good** | **Needs Improvement** |
| --- | --- | --- | --- |
| **Classroom Management** | **☐** | **☐** | **☐** |
| **Communication Skills** | **☐** | **☐** | **☐** |
| **Engagement with Children** | **☐** | **☐** | **☐** |
| **Lesson Planning** | **☐** | **☐** | **☐** |
| **Responsiveness to Feedback** | **☐** | **☐** | **☐** |
| **Parent-Teacher Interaction** | **☐** | **☐** | **☐** |
| **Creativity in Teaching** | **☐** | **☐** | **☐** |
| **Punctuality and Commitment** | **☐** | **☐** | **☐** |

**Strengths Displayed by the Teacher:**

**Areas for Professional Development:**

**Supervisor’s Comments:**

**Teacher’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Supervisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**