

Instructions: Conduct observation. Complete this form. Share results of observation with the instructor. File this completed form with appropriate Dean's office.

Instructor	Course	Semester/Year	
Instructor Is	Instructor was informed in advance of the tim		
🗌 Full Time 🔲 Part-time			

Provides opportunity for student questions and participation.	Excellent	Commendable	Satisfactory	Unsatisfactory
Comments and examples to support rating	1			
Please complete the following:				
Began on time			Yes	🗆 No 1

If needed, please use this page for additional comments .				
Instructor	Course	Semester/Year		
Observer Name		Observation Date		
Additional Comments				