

# Observation Form ST-01

<b>Placement</b>	<b>Observer</b>	<b>Observation Number</b>	<b>Post-Observation Conference Held?:</b>
1      2	CT      US	1   2   3   4	Y   N

Student Teacher: \_\_\_\_\_

Date: \_\_\_\_\_

Lesson Topic: \_\_\_\_\_

Duration: \_\_\_\_\_

**Strengths:**

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**Progress on Past Action Items and/or Things to Consider:**

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**New/Continued Action Items:**

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**On a scale from 1-3, please rate the student teacher on the following professional standard:**

*The candidate engages in ongoing professional learning and uses evidence/feedback to continually evaluate and adapt practice (InTasc Standard 9)*

<input type="radio"/> 1- Below Sufficient	<input type="radio"/> 2- Sufficient	<input type="radio"/> 3- Above Sufficient
The candidate demonstrates a minimal effort to implement observational feedback to improve professional practice	The candidate demonstrates effort to implement observational feedback to improve professional practice.	The candidate demonstrates the ability to implement observational feedback as well as his/her own reflective practices and other resources to improve professional practice.

Observer Signature: \_\_\_\_\_ Student Teacher Signature: \_\_\_\_\_