Garden Grove Unified School District Observation Report

Name:		Date of Visita	tion: Sche	Scheduled: Unscheduled:	
Scho	ool:				
Statu	ıs: Temporary 🗌	Probationary	Permanent (3-10)	Permanent (11+)	
Time	: From To	Subject:		Grade:	
	Factor Ratings		Observation	ns/Comments	
2. 3. 4.	INSTRUCTION Management of Instructional Time Instructional Strategies Instructional Presentation Appropriate Curriculum CLASSROOM MANAGEMENT Management of Student Behavior				
	Management of Classroom Enviro STUDENT PROGRESS	nment 🔲 🗎			
8.	Instructional Monitoring Instructional Feedback OTHER				
9. 10.					
Stre	ngths	Š			
Rec	ommendations (if applicab	<u>le)</u>			
Evaluator's Signature			Date		
Empl	ovee's Signature		Date		

My signature does not necessarily indicate agreement. A separate Statement of Employee Response may be attached to this report. If another page is attached, previous pages should be initialed by both parties.

- Employee Personnel File

Original - Employee Copy One - Employee Copy Two (Rev. 3/09) - Evaluator