Evaluation Form 8 (optional)

EVALUATION PRE-OBSERVATION MEETING

Name of Faculty Member: _____

Name of Evaluator: _____

The Evaluator provided a blank copy of the appropriate form that will be used during the Observation. ____ Yes

1. Type and subject of activity or topic to be observed?

2. What tools or techniques does the faculty member intend to use during the activity or topic being observed?

3. What will the evaluator be looking for during this observational period?

The Faculty member has provided relevant documentation to the Evaluator, such as the course syllabus, outline, assignment sheet, and/or work objectives to determine that the activity observed is appropriate to the environment.
_____ Yes

Faculty Member Name	Signature	Date
Evaluator Name	Signature	Date