

Tenured Teacher Pre-Observation Form

Teacher:_____ School Year:_____

Building:_____ Assignment:_____

Subject area to be observed:_____

Time and Date of Observation:_____

Teacher Stated Objective:

Instructional Delivery: (e.g. use of technology, text book,
manipulatives, lab, reading groups, hands-on activities)

Assessment: (e.g. individual practice, writing assessment,
quiz/test, homework)
