

Revised July 31, 2018

**Lakewood School District  
2018-2019  
Classroom Teacher Observation/Evaluation Form**

Name:	Observation Report: Unannounced
Grade/Subject/Level:	Time:
School:	Years in District:
Evaluator: Tova Feifer	Number of Pupils:
Date:	
Tenured/Non-Tenured Teacher:	Observation Number _____ for 2018-2019

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**LESSON SUMMARY**

**Posted Objective:**

**Posted DOL:**

**Is the objective aligned and on target with the BOE approved Lakewood School District Curriculum?**

Yes

**Summary:**

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Teacher's Initials: \_\_\_\_\_ Date: \_\_\_\_\_ Evaluator's Initial's: \_\_\_\_\_ Date: \_\_\_\_\_

## Lakewood School District Classroom Teacher Observation/Evaluation Form

### Components for Effective Instruction

**DOMAIN 2: INSTRUCTION- 40% Weighted**

	Exact Score
<b>2a: Creating an Environment of Respect and Rapport</b>	
<b>2b: Establishing a Culture for Learning</b>	
<b>2c: Managing Classroom Procedures</b>	
<b>2d: Managing Student Behavior</b>	

**DOMAIN 2 EVIDENCE:**

**DOMAIN 3: INSTRUCTION- 40% Weighted**

	Exact Score
<b>3a: Communicating with Students</b>	
<b>3b: Using Questioning and Discussion Techniques</b>	
<b>3c: Engaging Students in Learning</b>	
<b>3d: Using Assessment in Instruction</b>	
<b>3e: Demonstrating Flexibility and Responsiveness</b>	

**DOMAIN 3 EVIDENCE:**

**DOMAIN 4: PROFESSIONAL RESPONSIBILITIES - – 10% Weighted**

	Exact Score
<b>4a: Reflecting on Teaching</b>	
<b>4b: Maintaining Accurate Records</b>	
<b>4c: Communicating with Families</b>	
<b>4d: Participating in a Professional Community</b>	

Teacher's Initials: \_\_\_\_\_

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

Evaluator's Initial's: \_\_\_\_\_

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

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<b>4e: Growing and Developing Professionally</b>	
<b>4f: Showing Professionalism</b>	

**DOMAIN 4 EVIDENCE:**

**4A: Reflecting on Teaching**

**4B: Maintaining Accurate Records**

**4C: Communicating with Families**

**4D: Participating in a Professional Community**

**4E: Growing and Developing Professionally**

**4F: Showing Professionalism**

**RECOMMENDATIONS:**

**STUDENT ACHIEVEMENT DATA:**

**Teacher Comments:**

**Pre-Observation Conference Date:** N/A

Teacher's Initials: \_\_\_\_\_

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

Evaluator's Initial's: \_\_\_\_\_

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

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**Observation Date:**

**Post-Observation Conference Date:**

**Date Given To Staff Member:**

**Attendance Data for School Year 2018 – 2019**

**Sick:**

**Personal:**

**Professional:**

**Years in District:**

**Accrued Sick Leave:**

**Accrued Personal Leave:**

**Evaluator's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Teacher's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Teacher's signature does not necessarily indicate agreement with the observation report, only that the report was read and discussed with the evaluator).

**Principal's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Received by the Human Resource Department on:** \_\_\_\_\_

Teacher's Initials: \_\_\_\_\_ Date: \_\_\_\_\_ Evaluator's Initial's: \_\_\_\_\_ Date: \_\_\_\_\_