

School Services Personnel Observation Form

Observer _____

Educator Observed _____

School Name _____

Observation Number _____

Date: ____/____/____

Time: _____

Planning of Services	Observer Score	Self Score
Scope of Work (SOW)		
Analysis of Work Products (AWP)		
Evaluate Services and/or Program (EVAL)		
Environment	Observer Score	Self Score
Expectations (EX)		
Managing Student Behavior (MSB)		
Environment (ENV)		
Respectful Culture (RC)		
Delivery of Services	Observer Score	Self Score
Standards and Objectives (SO)		
Motivating Students (MS)		
Delivery of Professional Services (DPS)		
Service Structure and Pacing (SS)		
Activities and Materials (ACT)		
Communication (COM)		
Consultation (CON)		
Developing Educational Plans for Students (DEV)		
Professional Content Knowledge (CK)		
Knowledge of Students (KS)		
Organization of Services (ORG)		
Problem Solving (PS)		

Reinforcement Objective:

Indicator: _____

Notes:

Refinement Objective:

Indicator: _____

Notes:

Observer Reflection on Observation (Optional):

Teacher Reflection on Observation (Optional):

Adapted from the National Institute for Excellence in Teaching. Do not duplicate without permission.

Observer Signature _____

Date _____

Educator Signature _____

Date _____