



CLASSROOM OBSERVATION: Pre-Observation Questions

Department: _____

Instructor: _____ Office: _____

Phone: 8- _____ OR _____ E-mail: _____@ilstu.edu

Course Number and Name: _____

Number of students in class: _____ Level of students: FR _____ SO _____ JR _____ SR _____

Students are: MAJORS NON-MAJORS MIX Overhead/Whiteboard in room? _____

Meeting days/time: _____ Building/Room Number: _____

Date of Observation: _____

INSTRUCTOR INFORMATION

Teaching Philosophy

Tell me something about your teaching philosophy and explain how you think your teaching in this course reflects or fails to reflect that philosophy.

Teaching Strengths

What are your strengths as an instructor? What do you feel you do particularly well?

Teaching Concerns

What, if any, concerns do you have about your teaching? Specifically, what made you decide to ask for a classroom observation?

COURSE INFORMATION

Course Goals

What are students to know/be able to do as a result of taking this class? What goals or outcomes will be addressed on the day of the observation?

Course Design

How are class sessions generally structured? (i.e. What activities are routine/typical?)

Any unusual or unique elements of the class that we should be aware of?

Implementation

What should I expect to see on the day I observe?

OBSERVATION FOCUS

How specifically, would you like me to focus my observation of this class?

(For example: Use of media/technology; speaking style; variety of teaching techniques; non-verbal gestures and mannerisms; teacher/student rapport; organization of content; student attentiveness and note-taking; student participation levels; instructor utilization of physical space; general teaching skills; classroom discussion; patterns of interaction; etc.)

OTHER NOTES: