

**Developmental Supervision**  
**Pre-Observation Form**

**Teacher:** \_\_\_\_\_

**Observer:** \_\_\_\_\_

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

**Time:** \_\_\_\_\_

**Goals of the Observer**

- |   |
|---|
| 1. To observe an area/aspect of your classroom that you have predetermined      |
| 2. To function in the capacity that you see best fit throughout the observation |
| 3. To collect and analyze data in order to provide meaningful feedback          |
| 4. To assist you in the overall goal of improving student learning              |

**Pre-Observation Discussion**

**Area of Focus:**

1. In order to make the observation process most beneficial, it is important that I focus on an area that you have an established interest in. What is something that has been taking place in your classroom that you would like to explore further?

2. Have you taken any steps/actions regarding of this area of focus already?

3. What are your goals in regards to this area of focus?

**Role of the Observer:**

4. I should be utilized as an extra resource in your classroom during this observation. How can having an extra set of eyes/ears/hands be of value to you in regards to your area of focus?

5. I can be either an active participant or passive observer while in your classroom. In what way would you prefer that I function?

6. What type of data would you like to me collect during the observation to assist you in determining how you can meet your established goals?

**Feedback:**

7. My goal is to provide you with meaningful feedback that you can utilize following this observation process. What form of feedback would be most beneficial for you?

**Scheduling:**

8. When would you like me to conduct this observation?

9. How long would you like the observation to last?

10. When would you like the post-observation meeting to take place?

**Teacher Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Observer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_