**Teaching Observation Form**

This form may be used to document observations of Arts and Sciences Faculty. Completed forms should be submitted to the Dean’s Office to be placed in the faculty member’s permanent record.

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| **Faculty Member:** |  |
| **Department:** |  |
| **Course Number:** |  | **Course Title:** |  |
| **Date of Observation:** |  | **Person doing the observation:** |  |

* **Comments on Class Observation**:
* **Comments on Syllabus**:
* **Overall Comments**:

|  |  |
| --- | --- |
|  |  |
| **Observer’s Signature** | **Date Submitted** |

* **Chair’s Comments (*if chair did not do the observation*)**:

|  |  |
| --- | --- |
|  |  |
| **Department Chair’s Signature** | **Date Submitted** |