

Observation Details

Tutor:	Observer	Course:
Course Code :	Area of learning:	Date of visit:
Time of class:	Venue:	Arrangement of room:
Time of arrival:	Time of departure:	Number in class:
Number enrolled:	Week _____ of _____ week course	Retention to date:

Grades

Learning (L)		Teaching (T)		Attainment (A)	
Overall				Changes following moderation	

Overall learning session (to be completed only if helpful)

<p>Describing</p>	<p>Coaching</p>
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Overall learning session (to be completed only if helpful)

Describing

Coaching

Strengths in Learning, Teaching and Attainment

Areas for improvement in Learning, Teaching and Attainment

Areas that are fine and could become a strength

What evidence did the observer consult?

	Compliance Please tick	Quality Please grade		Compliance Please tick	Quality Please grade
Register	<input type="checkbox"/>	<input type="checkbox"/>	Lesson Plan:	<input type="checkbox"/>	<input type="checkbox"/>
Scheme of Work:	<input type="checkbox"/>	<input type="checkbox"/>	Individual Learning Plans:	<input type="checkbox"/>	<input type="checkbox"/>
Student Assessment Records:	<input type="checkbox"/>	<input type="checkbox"/>	Samples of learners' work	<input type="checkbox"/>	<input type="checkbox"/>

Feedback on documentation:

Overall evaluation of lesson (to be completed only if helpful)

Tutor comments:



Observer signature:

Tutor signature:

Date

Date