

# FORMATIVE PROCESS

## CONFIDENTIAL GTOI OBSERVATION RECORD: STANDARD FORM

Teacher's Name										System										School									
Teacher's System State Code		Teacher's School State Code		Last 4 digits Teacher's SSN				Last 4 digits Observer SSN				Date MO DAY YR			Beginning Time: _____					Ending Time: _____					Total Minutes		Lesson Segment (Circle One) B M E O		

Focus of Lesson: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TEACHING TASK I: PROVIDES INSTRUCTION																				Mark Scores for Each Dimension																			
Comments: _____ _____ _____ _____ _____																				A. Instructional Level					NI					S									
																				B. Content Development																			
																				1. Teacher-focused					NI					S									
																				and/or																			
																				2. Student-Focused					NI					S									
																				C. Building for Transfer					NI					S					NA				
TEACHING TASK II: ASSESSES AND ENCOURAGES STUDENT PROGRESS																																							
Comments: _____ _____ _____ _____ _____																				A. Promoting Engagement					NI					S									
																				B. Monitoring Progress																			
																				C. Responding to Student Performance					NI					S									
																				D. Supporting Students					NI					S									
TEACHING TASK III: MANAGES THE LEARNING ENVIRONMENT																																							
Comments: _____ _____ _____ _____ _____																				A. Use of Time					NI					S									
																				B. Physical Setting																			
																				C. Appropriate Behavior					NI					S									

(signatures)	(date signed)	POSITION:
OBSERVER: _____	DATE: _____	Sign and return copy to principal's office. Signature acknowledges receipt of form, not necessarily concurrence. Written comments may be provided and/or attached. Initial and date here if comments are attached.
TEACHER: _____	DATE: _____	

Teacher's Comments: \_\_\_\_\_

\_\_\_\_\_