



ED 398 Observation Feedback Form

Student \_\_\_\_\_ Date \_\_\_\_\_

1. How well was the lesson plan written? Was it clear and easy to follow? Did it include all of the important components?

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2. How well did the student carry out the lesson plan's objectives?

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3. How were the students engaged during the lesson?

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4. Commendations (positive aspects of lesson)

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5. Recommendations (suggestions for future lessons)

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Student Name \_\_\_\_\_

Cooperating Teacher \_\_\_\_\_

School \_\_\_\_\_

Subject/Grade Level \_\_\_\_\_