

**Tenured and Non-Tenured  
Informal Observation Report**

*(To be followed by Post-Conference)*

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

School: \_\_\_\_\_

Administrator: \_\_\_\_\_

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

Date of Observation: \_\_\_\_\_

Length of Observation: \_\_\_\_\_

Date of Post-Conference: \_\_\_\_\_

A. Observation:

B. Comments relative to:

- \_\_\_\_\_ Planning
- \_\_\_\_\_ Instruction
- \_\_\_\_\_ Assessment
- \_\_\_\_\_ Classroom Management

C. Teacher's Reflection

D. Signatures

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

Administrator: \_\_\_\_\_

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

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