|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Classroom Observation Plan***  **(To be completed by the evaluatee prior to the classroom visit)**   |  |  | | --- | --- | | **Course:** \_ | **Section:** \_ |  |  |  |  | | --- | --- | --- | | **Room:** \_ | **Time of Class:** \_ | **Day of class:** \_ |      |  | | --- | | **Date of visit:** \_ |  |  | | --- | | **Number of students enrolled:** \_ |  |  | | --- | | **Evaluatee:** \_ |  |  | | --- | | **Evaluator:** \_ | |

**Please attach your course syllabus**.

|  |
| --- |
| **1. State the objective(s) of the class session.** |
| \_ |
| **2. How do you plan to achieve this/these objective(s)? What teaching methods/activities will you use?** |
| \_ |
| **3. Explain how the content of this session fits into the student learning outcomes for the course.** |
| \_\_ |