

INSTRUCTIONAL OBSERVATION FORM FOR
LABORATORY AND STUDIO SETTINGS

Faculty Member: _____

Evaluator: _____

Date: _____

Class: _____

1. Was the laboratory or studio lesson organized and clearly presented?

2. Describe the level of student interest and participation?

3. Describe the quality of interpersonal relations between the instructor and students.

4. What was particularly effective about the instruction? And, what could be done to improve the laboratory or studio offering?

Signature of Faculty Member: _____

Date

Signature of Evaluator: _____

Date