



**Division of Nursing
Classroom Observation Form**

Instructor: _____ Evaluator: _____

Course _____ Date and Time _____

Meets/Exceeds = M Needs Improvement=NI Does not meet = NO Not Applicable = NA

Topic	Rating	Description/Examples/Comments
1. EXPERTESE IN SUBJECT MATTER CONTENT (Shows good command and knowledge of subject matter)		
2. ORGANIZATION (Organizes subject matter; evidence preparation; is thorough; states clear objectives; emphasizes and summarizes main points, meets class at scheduled time, regularly monitors on-line course)		
3. RAPPORT (Holds interest of students; is respectful, fair, and impartial; provides feedback, encourages participation; interacts with students, shows enthusiasm; Students encouraged to ask questions and participate in discussion)		
4. TEACHING METHODS (Implements evidence-based teaching strategies appropriate to learner needs, desired outcomes, content, and context. Provides opportunities for learners to develop critical thinking and clinical judgement skills (Active learning))		
5. PRESENTATION (Uses technologies skillfully to support the teaching-learning process. Information presented at appropriate course level. Interacts with students and encourages them to participate in discussions. Evidence preparation, clear objectives, summarizes main points.)		
6. MANAGEMENT (Uses time wisely; attends to course interaction; demonstrates leadership ability; maintains discipline and control; maintains effective e-platform management)		
7. SENSITIVITY (Exhibits sensitivity to students' personal culture, gender differences and disabilities, responds appropriately in a non-threatening, pro-active learning environment)		

Topic	Rating	Description/Examples/Comments
8. Comprehension (Periodically assesses student learning and modifies teaching strategies as necessary to increase effectiveness in achieving learning outcomes)		
9. PERSONAL (Evidences self-confidence; maintains professional comportment and appearance)		

Strengths observed:

Suggestions for improvement:

Instructor response:

Evaluator signature: _____ Date: _____

Instructor Signature: _____ Date: _____

Artifact	Yes/No	Notes
LMS: Syllabus, Calendar, learning plans		
Exam Soft: Random test pulled that met testing guidelines		
Faculty Development: Required Nurse Tims completed for year		