

TEACHING PRACTICE EVALUATION FORM

Student's name:  
 Supervisor's name:  
 School:

Signed:  
 Date:

\*E \*S \*I

A. PERSONAL QUALITIES AND ATTITUDE			
1. Presence/confidence in class			
2. Voice quality			
3. Professional attitude/commitment			
4. Rapport with pupils			
B. PLANNING			
5. Aims and objectives			
6. Shape and balance of activities			
7. Preparation / suitability of materials			
8. Familiarity with subject content			
C. IMPLEMENTATION			
9. Classroom management			
10. Pace and timing			
11. Use of teaching aids/materials			
12. Clarity of explanation/instruction			
13. Correction techniques			
14. Questioning techniques			
15. Accuracy/appropriacy of language			
16. Ability to improvise/adapt to needs			
17. Pupils involvement			
18. Achievement of objectives			
D. EVALUATION			
19. Self-evaluation			
20. Constructive response to criticism			

\*E = Excellent    \*S = Satisfactory    \*I = Inadequate

Please add any further comments here and/or overleaf