

# Teacher Observation Form

Your Name: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_

Type of Class \_\_\_\_\_

Date Observed \_\_\_\_\_

1. **Pre-class information:** Was the instructor early, on time, or late: What kind of interaction was there between the instructor and students.
2. **Warm-up:** Describe the type of warm-up. Approximately how long? Did it seem appropriate? (Rehearsal moves, full-body movements, dynamic joint isolations?)
3. **Cardiorespiratory Workout:**  
Did it build progressively? Explain

How did the movements flow together?

Was it choreographed or free style?

Did the movement appear to be easy to follow?

How did the instructor regulate the intensity of the aerobic movement?

4. **Resistance or Toning Exercises:**  
Were weights, elastic resistance or calisthenics completed?

Describe the sequence of the resistance/toning sequence.

Comment on the choice of exercises, repetitions, and overall effectiveness?

5. **Cool-down/relaxation: Please describe this section**

6. **Teacher Skills**

Describe the interest, energy level and enthusiasm of instructor.

Describe the verbal and non-verbal communication during the class.

Did the instructor cue the exercises appropriate for the students to follow? Were succinct comments used during the class? Describe

Did the instructor address different ability levels by showing or explaining any modifications. Describe

How clear was the instructor's voice (pleasant, audible, easy to understand)?

Did the instructor appear to interact successfully with the students?

Was the music volume and selection appropriate for the class?

Do you feel this was a safe and effective class? Why or why not?

7. **Closing Comments: What useful ideas (or impressions) did you obtain from this observation?**