

Classroom Observation

Student's Name: _____ Date of Observation: _____

School: _____ Grade: _____ Classroom Teacher's Name: _____

Observer's Name: _____ Time Started: _____ Time Ended: _____

Observed Subject Area: * _____ *Note: For Specific Learning Disability consideration, please ensure the observations of the student relate to and reflect the deficit areas being considered (i.e. suspect reading problems, observe student during a reading task)

Specific Activity:

In your opinion does the curriculum material match the student's ability? (✓ Check one) Too Easy Appropriate Too Difficult

Description of student during observation. (Please be concrete and specific) Example: Lucy was reading a word list out loud and correctly read 9 out of 14 words given to her. She had trouble with digraphs, blending and word attack skills. Her reading fluency seemed labored with the passages given to her.

Coordination: Gross Motor was good adequate poor Fine Motor was good adequate poor

Communication: Receptive was: good adequate poor Expressive was: good adequate poor

Behavior Snapshot: (please ✓ check applicable descriptions)

Attention to Class Activities:

- attentive
- daydream
- distracted
- visual learner
- auditory learner

Response to Class Routine:

- transitions well
- requires structure
- resistant to change
- disregards to change

Interaction with Peers:

- passive
- active
- anxious
- confident
- aggressive
- rejected

Interaction with Teachers:

- passive cooperative
- active demanding
- anxious needed help and sought it
- confident did not seek help
- defiant

Mood:

- happy enthusiastic
- sad reserved
- angry preoccupied
- sullen defeated
- pouty