

## Y qt milsg'Qdugt xcvlqpu'Gxcnvcvlqp'Hqt o <Kpurt wevlqpcriUr gelcriuv'

Employee:  Course and Section #:		Evaluator:	
		Semester and Year:	
Number of students in attenda	ince:		
Scheduled Start Date/Time: Scheduled End Date/Time:		Start Date/ Time of Evaluation:  End Date/Time of Evaluation:	
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Demonstrates knowledge     of subject area while     working with students.	Excellent		
	Satisfactory		
	Needs Improvement		
	Unsatisfactory		
2. Assists students with supplemental support to address specific instructional needs.	Excellent		
	Satisfactory		
	Needs Improvement		
	Unsatisfactory		
3. Demonstrates knowledge of learning resources available to students and ability to match those resources to particular student needs.	Excellent		
	Satisfactory		
	Needs Improvement		
	Unsatisfactory		
4. Demonstrates clear communication, including effective listening, as well as patience, responsiveness, and respect for the student.	Excellent		
	Satisfactory		
	Needs Improvement		
	Unsatisfactory		

5. Provides an environment in which the dignity and individuality of students are respected, and is sensitive to diverse learning styles.	Excellent Satisfactory Needs Improvement	
	Unsatisfactory	
6. The Specialist is responsive to student questions and provides feedback.	Excellent	
	Satisfactory	
	Needs Improvement	
	Unsatisfactory	
7. Multiple instructional modalities are utilized to meet student needs.	Excellent	
	Satisfactory	
	Needs Improvement	
	Unsatisfactory	
8. The Specialist's presentation of the material demonstrates effective preparation and planning.	Excellent	
	Satisfactory	
	Needs Improvement	
	Unsatisfactory	

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## **Worksite Observations Evaluation Form**

**General Comments:**