

York College of Pennsylvania

Department of Education

Field Experience Lesson Evaluation

Original: Student Copy 1: Teacher

Name: _____ Date: _____

Subject(s)/Grade: _____ Conference Afterward: YES/NO

Planning and Preparation – (PA standards, Objectives, Knowledge of content, Lesson plans, Differentiation, Resources, Technology, Assessment of learning, Level of instruction)

Classroom Management – (Physical environment, Behavior management, Interactions, Routines and procedures, Rapport, Focus, Engagement rate)

Instructional Delivery – (Congruence, Communication, Strategies & Techniques, Content, Engagement, Transitions, Questioning, Pacing, Feedback, Assessment, Integration, Reinforcement, Higher order thinking)

Professionalism – (Integrity, Judgment, Respect, Peer interaction & communication, Reflectivity, Procedures, Participation, Commitment)

Host Teacher's Reaction and Suggestions

YCP Student Signature: _____ Date: _____

Host Teacher's Signature: _____ Date: _____