

# 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: \_\_\_\_\_