**Level 3 Lesson Observation Form**

Date\_\_\_\_\_\_\_\_\_\_\_\_ Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Observer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lesson Content Area\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Level\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lesson plan received one day before lesson taught? Yes No

Rating of Lesson (circle one)

1 2 3 4 5 6 7 8 9 10

Weak Strong

COMMENTS

Strengths observed

Suggestions for improvement, extensions, or other ideas