

Mounds View Public Schools
350 Highway 96 West
Shoreview, MN 55126

Form EG-5103A

PRE-OBSERVATION INFORMATION FORM

Teacher _____ Date _____

Subject _____ Time _____

1. **OBJECTIVE(S)** - List the objective(s) or outcomes you expect students to accomplish:

2. **ASSESSMENT** - How will you know that students accomplished the expected outcome(s)?

3. **ACTIVITIES** - What activities will be used to accomplish the objective(s)?

4. **UNUSUAL CONDITIONS** - Describe any unusual conditions or circumstances that may exist in the classroom which might affect instruction and/or learning:

5. **FOCUS FOR THE OBSERVATION** - Specifically what feedback would you like from the observation?

Sept. 1996
Revised: 3-8-06 (address change only)