

OBSERVATION GUIDE 3.

STUDENT \_\_\_\_\_ LEVEL \_\_\_\_\_ TEACHER \_\_\_\_\_

DATE \_\_\_\_\_ ROOM \_\_\_\_\_ OBSERVER \_\_\_\_\_

To be completed by the teacher:

Please list your primary goal for this student in each of the areas listed below. Return this form to the observer the day before the scheduled observation.

The lesson will be evaluated on the effectiveness and efficiency of your teaching toward the realization of these goals.

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MUSICIANSHIP

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TECHNIQUE

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PRACTICE HABITS