

PROBATIONARY FACULTY: \_\_\_\_\_ OBSERVATION DATE: \_\_\_\_\_

DEPT: \_\_\_\_\_ CLASS OR ALLIED ACTIVITY: \_\_\_\_\_

COURSE OBSERVED: \_\_\_\_\_ SECTION # \_\_\_\_\_

Number of additional pages attached to this report: \_\_\_\_\_

Summary of student evaluations attached? Yes \_\_\_ No \_\_\_

**Using separate pages complete the evaluation of the three job performance components listed below:**

**1. STUDENT CONTACT ACTIVITIES:**

- A. General: Assess the probationary faculty member's general performance of student contact activities as defined in Article 17 of the Contract. Identify areas for development and/or suggestions for continued growth.
- B. Instructional Observation: In describing a classroom observation, consider the types of activities listed in the Contract related to classroom management and instruction, and **comment on EACH of the factors listed below:**  
**OR,**  
 Allied Activity Observation: In describing an allied activity observation, consider the types of activities listed in the Contract related to allied student contact, and **comment on EACH of the factors listed below:**

- 1. Clarity and organization
- 2. Subject matter expertise
- 3. Communication skill
- 4. Rapport and interaction with students
- 5. Enthusiasm
- 6. Summary of student evaluation/comments (Note: do not submit raw data)
- 7. For classroom instruction, comment on classroom management.
- 8. Additional comments.

**2. COLLEGE SERVICE:**

Assess the probationary faculty member's general performance of college service activities as defined in Article 17 of the Contract. Identify areas for development and/or suggestions for continued growth.

**3. PROFESSIONAL SERVICE AND DEVELOPMENT:**

Assess the probationary faculty member's general performance of professional service and development activities as defined in Article 17 of the Contract. Identify areas for development and/or suggestions for continued growth.

Team member's signature: \_\_\_\_\_ Print: \_\_\_\_\_ Date: \_\_\_\_\_

**Team member's role (select one):**      *Supervising Administrator*      *Department Chair*      *Discipline Peer*

In signing this *Team Member Report*, the probationary faculty member acknowledges having seen and discussed the complete report. The probationary faculty member's signature does not necessarily indicate agreement with the conclusions of the report. The probationary faculty member may submit to the team member a written response to this report, with a copy to the supervising administrator, within ten (10) working days from the date of this report. The copy shall become part of the tenure review portfolio. (Section 87031, California Education Code.)

**Probationary faculty member's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Written Observation Report

Team Member Observing: \_\_\_\_\_ Date: \_\_\_\_\_

Class Observed: \_\_\_\_\_ Section #: \_\_\_\_\_