



THE GRADUATE CENTER

Office of Human Resources

Observation For Instructional Staff

Graduate Assistants

Employee Name: _____ Title: _____

College: _____ Program/Academic Discipline: _____

Course: _____ Section: _____ Semester: _____ Date of Observation: _____

A. Observation

1. Based on this observation, comment on the graduate assistant's general effectiveness:

2. Within the framework of the graduate assistant's general effectiveness discussed above, comment on his/her classroom effectiveness, handling of scholarly material, teaching techniques and classroom atmosphere.

3. Please rank on the following scale:

_____ _____ _____ _____ _____
Excellent Very Good Good Satisfactory Unsatisfactory

B. Summary of Evaluation

Observer Name: _____ Title: _____

Observer Signature: _____ Date: _____

Department: _____

THE GRADUATE CENTER
Office of Human Resources
Instructional Staff – Graduate Assistants
Post-Observation Conference Memorandum

Post-Observation Conference

Observation Date: _____

Course and Section: _____

Name of Observer

Title

Employee Name: _____

Department: _____

Date of Discussion: _____

(Attach Additional pages if necessary).

Observer Signature: _____

Date: _____

I understand that my signature means only that I read the observation and that I may attach any comments I wish.

Employee Signature: _____

Date: _____