

# Post Observation Conference Form

Dallas School District  
Dallas, Oregon 97338

☐ Formal Observation

☐ Informal Observation

Name \_\_\_\_\_  
School \_\_\_\_\_ Supervisor \_\_\_\_\_  
Assignment \_\_\_\_\_ School Year \_\_\_\_\_ Date&Time of Visit \_\_\_\_\_  
Subject or Class \_\_\_\_\_

## I. Planning and Preparation Observed:

## II. Classroom Environment Observed:

## III. Instruction Observed:

## IV. Comments:

Staff Member's Signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_