

16 Teacher Training Observation Form

Adapt this teacher training observation form to collect objective data about logistics, training content, and teacher engagement.

SECTION 1: GENERAL INFORMATION

Date of training session:	<input type="text"/>	Training session name:	<input type="text"/>
Name of observer(s):	<input type="text"/>		
Observation start time:	<input type="text"/>	Observation end time:	<input type="text"/>
Total # of teachers:	<input type="text"/>	Total # of coaches:	<input type="text"/>
Total # of trainers:	<input type="text"/>	Total # of other staff:	<input type="text"/>

Facilities and Technology:

Was the training space sufficient and comfortable for participants? Could they see, hear, and participate?

Facilities		
Category	Sufficient?	Provide a brief description of the issue for all "no's." Also explain the resolution, if there was one.
Room size	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Room arrangement and seating	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Noise level	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Lighting	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Temperature	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Notes: _____

SECTION 3: PARTICIPANT ENGAGEMENT

Directions: Based on your observations and opinions, please rate the approximate percentage of participants highly involved in each training activity. Participants’ overall level of participation should be considered based on whether they: (1) respond to solicitations for participation (questions, group activities, etc.) and (2) are attentive (not distracted) during training activities. In the second table, select reasons for variation in participation levels throughout the day and explain your observation(s).

Approximately what percentage of participants were engaged throughout (on average):	25% or less	25% to 50%	50% to 75%	about 100%
Whole-group activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Small-group activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paired activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Was variation in the level of participant engagement or participation due to the following (check all that apply):

Provide a brief explanation

- Training strategy (for example, lecture, role-playing, small-group discussion) _____
- Which trainer led the group _____
- Topic/activity being discussed _____
- Time of day (for example, more engagement in the morning) _____
- Length of presentation/timing of breaks _____
- Other: _____

NOTE BELOW:

1. Any issues that need follow-up.

2. Any additional information you consider necessary to capture the activities or logistics of this training session. Include comments on any feature of the session that may help to improve future sessions.

3. Lessons for the next training session.
