20 Minute Observation Form							
Teacher			Grade Level	Date		Observer	
Time in:	Time out: _			# Stude	ents:	#	Adults:
Student schedule posted?	→ Yes → No)	Schedule used by:	→ Students	→ Staff	On Schedule?	→ Yes → No
Classroom rules posted?	→ Yes → No	Staff ha	ve visual rules with th	nem: → Yes	→ No	Student work displ	ayed: → Yes → No
Curriculum Used/Activity Obse	erved						
Creative Curriculum							
eisure Activity							
PECS (or other communication s	ystem)						
Personal Care Activity							
Social Skills Instruction/Activity							
ouchmath							
Jnique Learning System							
Other:		-					

Student Behavior/Learning	
# Engaged/Participating	
# of students alone or unengaged	
# who have/use communication system	
# of students who walked/wheeled/moved independently in the classroom (without physical guidance)	
# of students who used PECS to communicate independently	
Evidence of Positive Behavior Intervention Supports:	

Research Based Strategies

Identifying similarities and differences summarizing/note-taking reinforcing effort/recognition homework/practice

Nonlinguistic representations

Cooperative learning

Setting objectives/feedback

Generating/testing hypotheses

Cues/questions/advance organizers

Other: Other: _ Comments:

Teacher Behavior 101	AL
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# of times visual reminders used		
Staff are teaching/reviewing the rules	Yes/No	
Visuals/Manipulatives used to assist with understanding of concepts taught	Yes/No	
Tally of positive student contacts		
Tally of negative student contacts*		
Ratio of positives to negatives	to 1	
Additional Comments:		
Was the activity made functional		
Comments:	Yes/No	

Para Educator Behavior	
Engaged/Participating Comments:	Yes/No

Was the activity made functional for the students?		
Comments:	Yes/No	
IEP Goals and Objectives		
Observer can identify data collection method	Yes/No	

Depth of Knowledge Level 1 – Recall Level 2 – Skill / Concept Level 3 – Strategic Thinking Level 4 – Extended Thinking Comments: