

Mathematics Institute, University of Warwick

Peer Observation form for Supervisions and Support Classes

**Observer:** please fill in sections 1 to 4 with observations during the session, and then in the post-session discussion with the observee fill in the “agreed actions” section for the observees reference. As part of the observation please also examine a selection of work that has been marked (if applicable). Both observer and observee sign and date the slip at the bottom, tear it off and hand in to the Undergraduate Office as a record that the observation has taken place. The remainder of the form remains confidential to the observer and observee. Please be honest and critical!

Observer’s Name:

Observee’s Name:

Session type: (supervision or support class):

1. Overall impression of the session.

2. Please comment on the following: student participation; interactivity in the session; and student led teaching and learning.

Please sign below to agree that the observation has taken place, cut off this slip, and hand it in to the Undergraduate Office. The remainder of the form is a personal record for you.

Type of observation: Supervision:  Support Class:  Other (please specify): \_\_\_\_\_

Date of observation: \_\_\_\_\_

Observee Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Observer Name: \_\_\_\_\_

Signature: \_\_\_\_\_

3. (If there is work marked for this session) please comment on feedback on work and clarity of marking and evidence of mark scheme used.

4. What went particularly well in this session?

5. What could be improved?

6. Agreed actions (after discussion between observer and observee).

INTENTIONALLY BLANK

(Back of tear-off slip!)