

COLLEGE OF EDUCATION WARRI



NCE PROGRAMME: TEACHING PRACTICE ASSESSMENT FORM

Notes on the use of this form:

- 1 This form is aimed at (a) standardising the supervisor’s evaluation of the student teacher’s performance (b) Provide the College with a profile of a student teacher’s academic and professional strength or weakness or both.
- 2 This form consists of six questions which require the supervisor to rate on a scale shown on the maximum mark column.
- 3 Supervisors are expected to comment in the column provided in each question. This will guide or ensure appropriate correction and scoring of the student teachers.
- 4 The student teacher is expected to have a copy of the completed assessment form. Scores, however, **SHOULD NOT BE INCLUDED** in the student’s copy. Scoring or ticking should be done by the supervisor hereafter.

Name of Student:.....Matric. No:.....Dept.....

Name of TP School

Subject TaughtTopic.....

Class:.....Duration.....Date.....

	Max Mark	Score Awarded	Comment
1 PREPARATION			
Lesson Plan			
(a) Statement of objectives	5		
(b) Content (i) Logicality and Sequence	2		
(ii) Adequacy	3		
2 PRESENTATION			
(a) Introduction (Relevance)	5		
(b) Development of lesson	5		
(c) Mastery of Subject matter	10		
(d) Use of Chalkboard	5		
(e) Time management	5		
(f) Questioning Technique	5		
(g) Effective use of instructional materials:			
(i) Relevance			
(ii) Adequacy	5		
(iii) Variety			
(h) Class participation	10		
(i) Summary / Conclusion	5		

3. CLASS MANAGEMENT			
(a) Class control	5		
(b) Class arrangement	2		
(c) Reaction and reinforcement of pupils' responses	5		
4. COMMUNICATION SKILLS			
(a) Clarity of voice / audibility	2		
(b) Appropriate use of language (Gestures, sketches etc)	3		
5. EVALUATION			
(a) Suitability of Assessment	5		
(b) Attainment of stated goals	5		
6. TEACHERS PERSONALITY			
(a) Neatness / Dressing	4		
(b) Comportment	4		
TOTAL SCORE	100		

GENERAL COMMENT: -----

Name of Supervisor

Signature and date