

## TA Evaluation Report Form A

TA's name: \_\_\_\_\_ Observer's name: \_\_\_\_\_

Course: \_\_\_\_\_ Is Observer the Course Director? \_\_\_\_\_

*This Form should be used for TAs who were assigned teaching responsibilities requiring regular group interaction with the class, for instance recitation instructor, lab instructor or lecturer duties. Other TAs, such as graders or lab experiment designers who did not meet regularly with the class, should be reported on Form B rather than this form.*

### 1) **OBSERVATION AND REPORT PROCEDURE**

*What day(s) did you observe, did you come unannounced, or did you pick a time mutually agreed in advance?*

### 2) **PREPARATION**

*How well was the TA prepared for this class?*

### 3) **USE OF MEDIA**

*Use of overheads, chalkboard, computer, microphone (if needed), other equipment.*

### 4) **ORAL QUALITY**

*Sufficient volume to be heard throughout the room? Accent,, speed of speech satisfactory?*

**5) STUDENT INTERACTION**

*Degree of interaction of TA with students before, during, and/or after class. Quality of the interactions: did it seem that students' questions were being answered, student needs met?*

**6) TA SUPPLEMENTARY MATERIAL**

*Usefulness of TAs personal website content related to course, material on course website produced by TA, handouts and notes produced by TA, if any.*

**7) OTHER COMMENTS**

*For instance, did TA hold the class's attention, complete his/her planned material?*

**8) OBSERVER'S SUMMARY**

*Attach additional sheets if needed*

**A. Areas of TA teaching strength****B. Areas requiring improvement****C. Suggestions for improved teaching effectiveness**

**D. TA's teaching performance compared to observer's expectations for satisfactory TA performance (check one):**

- Exceeds expectations
- Meets expectations
- Below expectations

**Additional comments on TA's performance compared to expectations (if any)**

**9) Signatures**

*Please read and sign below, and return to the Chair of the CSE Dept. Teaching Quality Committee.*

We have met and reviewed this report, and in particular discussed any areas identified as requiring improvement and suggestions for how to do so.

\_\_\_\_\_  
Signature of TA

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Course Director

\_\_\_\_\_  
Date