

Cobb County School District

Cobb Keys Speech Language Pathologist Instructional Observation Form

I. IDENTIFICATION

SLP's Name	School		Evaluator			
Date Observed	Announced	Unannounced	Type of Therapy Observed			
Grade Level	Location	Therapy Room	Gen Ed Class	Small Group Class	Start Time	End Time

II. OBSERVATION

Classroom Environment Standard: *The SLP creates a safe, productive, collaborative and inviting learning environment that fosters a sense of personal responsibility to ensure that students maximize learning.*

- | | | |
|---|-----|----|
| 1. The SLP establishes rules and procedures that support a positive, productive learning environment. | Yes | No |
| 2. The SLP's therapy room is clean, safe and organized. (NA if observed in inclusion setting) | Yes | No |
| 3. The SLP communicates behavioral and instructional expectations to students. | Yes | No |
| 4. The SLP responds appropriately to stressful and/or disciplinary situations when they occur. | Yes | No |
| 5. The SLP recognizes individual student differences. | Yes | No |
| 6. The SLP challenges students to exceed. | Yes | No |
| 7. The SLP provides appropriate responses to student questions. | Yes | No |
| 8. The SLP provides constructive feedback to students to improve student learning and behavior. | Yes | No |
| 9. The SLP offers praise and reinforcement consistently to recognize student gains. | Yes | No |

Assessment, Planning and Intervention Standard: *The SLP develops and implements treatment plans based on assessment data that demonstrate knowledge of research-based interventions, the Georgia Performance Standards and individual student needs.*

- | | | |
|--|-----|----|
| 1. The SLP creates lesson plans with clear objectives that address students' IEPs and a link to the GPS. | Yes | No |
| 2. The students are on task and actively engaged throughout the session. | Yes | No |
| 3. The SLP structures therapy sessions to maximize time-on-task. | Yes | No |
| 4. The SLP arranges therapy materials to be readily accessible during sessions. | Yes | No |
| 5. The SLP adheres to schedule, starting and ending sessions on time. | Yes | No |
| 6. The SLP develops and consistently uses an organized data collection system. | Yes | No |
| 7. The SLP uses activities that are student-centered and developmentally appropriate. | Yes | No |
| 8. The SLP modifies interventions as needed. | Yes | No |
| 9. The SLP displays knowledge of a variety of disorders and appropriate strategies. | Yes | No |
| 10. The SLP builds for transfer and generalization. | Yes | No |
| 11. The SLP uses materials and resources effectively. | Yes | No |
| 12. The SLP uses technology effectively when appropriate. | Yes | No |
| 13. The SLP displays creativity and flexibility. | Yes | No |

III. COMMENTS

IV. SIGNATURE

Evaluator _____

Date _____

Position _____

SLP _____

Date _____

*Receipt acknowledged. Signature does not indicate agreement or disagreement.
SLP gets a copy after signatures; retain original and submit with SLP Performance Report.*