



Post-Observation Teacher Follow-Up

UNI CIEP

HANDBOOK LOCATION: APPENDIX B-16

Observation Details

Teacher: _____ Date of Observation: _____
Observer: _____ Date of Follow-up: _____
Course: _____ Session, Year: _____
Type of Observation: Academic Support Coordinator Peer TESOL MA Coordinator

Follow-Up Plan

I will continue to:

I have decided to work on:

Specifically, I will:

By this date: _____

I will need these materials/resources:

Signatures

Signatures below confirm that a conference was held to discuss the observation

Teacher: _____ Date: _____

Observer: _____ Date: _____

For Office Use Only. Received by: _____ (initials) Date ____/____/____

File Path: T:\Documents\Office Admin\Handbooks\Staff Handbook\Appendices\Word Documents – Appendices\B-16. – Post-Observation Teacher Follow-up
Provide one copy to CIEP Director