Union County Educational Services Commission
Post-Observation Reflection Form
2017 – 2018 School Year

Name: _____ **Date:** _____

1. **In general, how successful was the lesson? What evidence do you have of student mastery?**

2. **To what extent were the instructional strategies and classroom procedures employed during the lesson effective? Did you depart from your plan? If so, how, and why?**

3. **If you had the opportunity to teach this lesson again to the same group of students, what would you do differently?**