

**OBSERVATION/EVALUATION REPORT**  
Health and Physical Education Licensure Program

Date: \_\_\_\_\_

Teacher Candidate: \_\_\_\_\_ School: \_\_\_\_\_

Observer: \_\_\_\_\_  Mentor Teacher or  University Supervisor

Activities Observed: \_\_\_\_\_ Grade/Subject(s): \_\_\_\_\_

**Content Knowledge (Standard 1) & Skill and Fitness-Based Competence (Standard2)**

**Planning & Implementation (Standard 3) & Impact on Student Learning (Standard 5)**

**Instructional Delivery & Management (Standard 4)**

**Professionalism (Standard 6)**

**Recommendations:**

\_\_\_\_\_  
Mentor Teacher

\_\_\_\_\_  
Date

\_\_\_\_\_  
Teacher Candidate

\_\_\_\_\_  
Date

9/9/2015