



Peer Observation and Feedback

Title of Session _____

Name of Observer: _____

Name of Learner: _____ Date: _____

Did the learner:	Yes/No	Describe and give examples
Introduce themselves and create a rapport with the learners?	<input type="checkbox"/>	
State the learning outcomes?	<input type="checkbox"/>	
Prepare materials which met the individual needs of the learners?	<input type="checkbox"/>	
Include the entire group during the session?	<input type="checkbox"/>	
Give positive and constructive feedback to the group when opportunity was presented to do so?	<input type="checkbox"/>	
Use a range of teaching and learning approaches to meet the individual needs of learners?	<input type="checkbox"/>	
Carry out a suitable assessment to meet the individual needs of learners?	<input type="checkbox"/>	
Summarise own session and refer back to the learning outcomes?	<input type="checkbox"/>	

Strengths	
Areas for development	

This form will be used for evidence for the observer and the learner and copies need to be within each portfolio.