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| --- | --- |
| **Name of Instructor Visited:** |  |
| **Course number, section, name:** |  |
| **Topic:** |  |
| **Date, Time, Room Visited:** |  |
| **Number of Students Present:** |  |
| **Date of Letter of Assessment:** |  |
| **Signature of Assessor:** |  |
| **Name of Assessor:** |  |

# General:

# Knowledge of Subject Matter:

# Organisation and Preparation:

# Presentation of Material:

# Interaction with Students: