**NORTHWESTERN CONNECTICUT COMMUNITY COLLEGE**

**INSTRUCTIONAL OBSERVATION FORM  
FOR LABORATORY AND STUDIO SETTINGS**

Faculty Member:

Evaluator/Title:

Date:

Class:

1. Was the laboratory or studio lesson organized and clearly presented?

1. Describe the level of student interest and participation.

1. Describe the quality of interpersonal relations between the instructor and students.

1. What was particularly effective about the instruction? And, what could be done to improve the laboratory or studio offering?

Signature, Faculty Member Date

Signature, Evaluator Date