Form 3a Observation, feedback and grading



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| **Name of Learner:** |  | **Date:** |  |
| **Name of Observer:** |  | **Length of session:** |  |
| **Title of session:** |  | **Length of observation:** |  |
| **Overall grade of session:** |  |  |  |
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| **Overall feedback to candidate**PlanningDeliveryResourcesCommunicationAssessmentsFeedback to learners |

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| **Unit 426** | **Comments**  |
| Confirm how the candidate has designed teaching and learning plans which respond to the individual goals and needs of all learner and curriculum requirements (ref. 3.2) |  |
| Confirm how the candidate hasestablished and sustained a safe inclusive learning environment(ref. 4.3) |  |
| Confirm how the candidate has used inclusive teaching and learning approaches and resources, including technologies, to meet the individual needs of learners (ref. 5.4) |  |
| Confirm how the candidate has demonstrated ways to promote equality and value diversity in own teaching (ref. 5.5) |  |
| Confirm how the candidate has communicated with learners and learning professionals to meet individual learning needs (ref. 5.7) |  |
| Confirm how the candidate has used types and methods of assessment including peer and self-assessment to:* involve learners in assessment
* meet the individual needs of learners
* enable learners to produce assessment evidence that is reliable, sufficient, authentic and current
* meet internal and external assessment requirements

(ref. 6.3) |  |
| Confirm how the candidate has applied minimum core elements in planning, delivering and assessing inclusive teaching and learning (ref. 7.2) |  |

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| **Significant strengths**  |

**Areas for development**

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| **Agreed action plan** |

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| **Observer signature:** | **Name:** | **Date:** |
| **Learner signature:** | **Name:** | **Date:** |
| **IQA signature (if sampled)** | **Name:** | **Date:** |