

University of Western Ontario
Department of Visual Arts

GRADUATE TEACHING ASSESSMENT FORM

Student Name: _____ **Date:** _____

Student Program & Year in Program (MA, MFA, PhD): _____

Assessor Name and Role: _____

Course and Section Number: _____

Student Role: Assistant to Professor _____ **Supervised TA Instructor** _____

Is the student in their Probationary Period? **Yes** **No**

1. Briefly describe the class situation being assessed, including the duration of the visit by the assessor:

2. Briefly list the student's strengths in the situation being observed:

3. Briefly list areas of weakness requiring improvement

4. (Optional) Comment on any other factors affecting the assignment based on discussion with the student or the Professor, or other observations:

Check the overall ranking of the student's teaching practice:

Excellent	Very Good	Good
Satisfactory	Needs significant improvement	Poor

Assessor's signature: _____