

**FORM 412-1**

**PRE-OBSERVATION FORM**

**Name:** Click or tap here to enter text. **Date of Observation:** Click or tap to enter a date.

**Grade:** Click or tap here to enter text. **Room Number:** Click or tap here to enter text.

**Subject Area:** Click or tap here to enter text.

1. What broader theme (context/strand/module) is this lesson connected to?
2. Where does this lesson fit into the broader theme?
3. What curriculum outcome(s) are connected to this lesson? What are the learning goals for students?
4. Outline what will be happening (how will you plan to activate prior knowledge, engage students, and consolidate learning?)
5. How will you know if the students have met the learning targets in this lesson?
6. What challenges do you anticipate during the lesson? How might you adjust, differentiate or adapt?