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| **Evaluation of session** |
| **Pupil performance:** |
| **Personal Teaching skills:** |

**** **Evaluation Form**

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| **Action plan:** |
| On the basis of the above evaluation what should pupils be doing next /what adaptations are needed for individuals? |
| On the basis of the above evaluation what do I need to do to improve my personal teaching skills / knowledge? |

Tutors Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teachers Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_