

CHEMISTRY DEPARTMENT:

CLASS VISITATION REPORT

Course Title: _____

Course No.: _____

Semester/Year: _____

Meeting Times: _____

Name of instructor: _____

A. Accuracy of content

Technical Terminology (appropriate use of)

Nomenclature (correct/current use of)

Use of symbols and structures (accuracy, clarity, conforms to conventions)

Other

B. Level of content

Quantitation (course appropriate handling of)

Other

C. Clarity of delivery

Use of media (competence with chosen format)

Legibility/Visibility

Voice (projection/pacing)

Other

D. Overall Effectiveness

Class interaction

Other

E. Miscellaneous

Date of Visit: _____

Time of Visit: _____

Name of Visitor: _____

Signature: _____

I have read this visitation report.

Instructor's Signature

Date