Summary of Peer Evaluation of Teaching for Online Teaching

Instructor: Class:

Evaluator: Review Date:

Number of students enrolled:

Pre-Evaluation Information:

Prior to the review, both the instructor and evaluator should review the most recent peer review. The instructor should fill out (a) and (b) below and provide it to the evaluator prior to the review.

1. **Developmental activities since last review (e.g., attended TEP workshop, conducted midterm evaluation of teaching, solicited developmental peer review, made specific changes in response to previous review (list examples), etc.):**
2. **Specific areas of focus for feedback during current review:**

Evaluation:

**Successful Elements:**

Content Mastery *(e.g., Instructor command of subject; Main ideas are clear and specific; Sufficient variety of learning materials; Main ideas are relevant and current; Use of real world and illustrative examples; Rigor of material appropriate for level of course)*

Teaching Methods and Materials *(e.g.,* *Course site is well organized: Course materials are easy to access and well organized; Lecture or other materials have content that is clear & well organized; Instructor provided an outline for the module; Introduction captured attention and outlined topics; Effective transitions (clear w/summaries); Clear organizational plan; Reviewed by connecting to previous material; Previewed by connecting to future material; Confident & enthusiastic in provided lectures; Appropriate course materials)*

Learning Environment *(e.g., Clear information on how to contact instructor, Instructor engagement is evident through discussions, announcements, lectures, feedback etc.; Instructor engages students with content and peers; Instructor provides formative feedback; Good rapport with students; Student engagement conducive to learning; Respectful and inclusive materials and communication)*

**Areas to Refine:**

Content Mastery

Teaching Methods and Materials

Learning Environment

**Overall Comments and Recommendations for Improvement:**

Signed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty Member (Instructor) Date

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Peer Evaluator Date