

**TEACHER I-III** 

## **RATING SHEET**

OBSERVER:	DATE:
TEACHER OBSERVED:	QUARTER:
SUBJECT & GRADE LEVEL TAUGHT:	

OBSERVATION: 1 2 0

## DIRECTIONS FOR THE OBSERVERS:

- 1. Rate each item on the checklist according to how well the teacher performed during the classroom observation. Mark the appropriate column with a (√) symbol.
- 2. Each indicator is assessed on an individual basis, regardless of its relationship to other indicators.
- 3. For schools with only one observer, this form will serve as the final rating sheet.

INE	INDICATORS		4	5	6	7	NO*
1.	Apply knowledge of content within and across curriculum teaching areas						
2.	Display proficient use of Mother Tongue, Filipino and English to facilitate teaching and learning						
3.	Use effective verbal and non-verbal classroom communication strategies to support learner understanding, participation, engagement and achievement						
4.	Establish safe and secure learning environments to enhance learning through the consistent implementation of policies, guidelines and procedures						
5.	Maintain learning environments that promote fairness, respect and care to encourage learning						

\* NO stands for Not Observed which automatically gets a rating of 3.







INDICATORS			5	6	7	NO*
<ol> <li>Maintain learning environments that nurture and inspire learners to participate, cooperate and collaborate in continued learning**</li> </ol>						
<ol> <li>Apply a range of successful strategies that maintain learning environments that motivate learners to work productively by assuming responsibility for their own learning**</li> </ol>						
<ol> <li>Design, adapt and implement teaching strategies that are responsive to learners with disabilities, giftedness and talents***</li> </ol>						
<ol> <li>Adapt and use culturally appropriate teaching strategies to address the needs of learners from indigenous groups***</li> </ol>						
OTHER COMMENTS:						

\* NO stands for Not Observed which automatically gets a rating of 3. \*\* Do not accomplish if the ratee opted to present SET A: A supplementary material as Means of Verification (MOV) of Objectives 7 and/or 8 in the RPMS Tool for Proficient Teachers or RPMS Tool for Teacher-Broadcasters.

\*\*\* Do not accomplish if the ratee opted to present SET B: **Teacher Reflection Form (TRF)** as Means of Verification (MOV) of Objectives 9 and/or 10 in the RPMS Tool for Proficient Teachers or RPMS Tool for Teacher-Broadcasters.

Signature over Printed Name of the Observer

Signature over Printed Name of the Teacher





