**Peer Enrichment of Teaching: Good Practice Worthy of Wider Dissemination**

*To be completed jointly by both participants after the session and post-observation discussion have taken place.*

|  |  |  |  |
| --- | --- | --- | --- |
| *School:* | | | |
|  | | | |
| *Name of Lecturer / Tutor:* | *Name of Observer:* | | |
|  |  | | |
| *Module Title:* | | *Date(s) of Observation:* | |
|  | |  | |
| *Type of Teaching Session:* | | *Number of Students present:* | |
|  | |  | |
|  | | | |
| *We confirm that this observation was made in accordance with School procedure, or that School procedure was not followed for the reason given overleaf:* | | | |
| *Signature of observer:* | | | *Date:* |
|  | | |  |
| *Signature of person observed:* | | | *Date:* |
|  | | |  |
| **GOOD PRACTICE WORTHY OF WIDER DISSEMINATION** | | | |
| *Please give a brief description for use by Staff Development Unit* | | | |
|  | | | |
| *I agree/do not agree that my School / the Staff Development Unit can use this information in training and in appropriate publications. (Please delete as appropriate)* | | | |
| *Signature of person observed:* | | | *Date:* |
|  | | |  |

**Observee: Please make two copies of this page only – one for yourself and one for your observer, and then forward the original to your Peer Enrichment Coordinator**