

**Morgan County Schools**  
**Direct Observation**

Name of Student \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

School \_\_\_\_\_

The purpose of this observation is to provide information regarding this student's classroom behaviors in the area (s) of suspected deficiency to the Response to Intervention/Support Team. Carefully observe this student and provide the requested information.

Describe the lesson/activities of the class during this observation session (e.g., lecture, discussion, independent seatwork, small group work).

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Describe any special conditions during this evaluation (e.g., student seated away from group).

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What was the student's behavior during the observation session? Be as specific as possible.

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How does this student's behavior compare to that of other students in the class? (Note: you may wish to compare the child to an average peer of the same age and gender.)

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Do you have any other comments or concerns?

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date