(Form of the student's observation card)

(educational institution)

OBSERVATION CARD

20 m. _____ d

(convenience)

Name and surname of the student

Date of birth _____

No	Area of activity is monitored	Short activity description
1	Favorite activity	
2	Ability to choose an activity: (self-help, teacher induction required)	
3	Self-employment skills	
4	Ability to accumulate and maintain attention	
5	The pace of activity	
6	Motorcycle (small, large)	
7	Ability to perceive the verbal front / individual instruction of the teacher and perform them	
8	Difficulty in learning software or the ways of new activities	
9	Participation in activity (activity, passivity)	
10	Behavior with peers	
11	Behavior with adults	
12	Ability to control your behavior during group activities	
13	Reaction to praise, promotion, an etc.	
14	Reaction to comments	
15	Other peculiarities of education and behavior	

Educator

(signature)

(Name and surname)