

**NATCHITOCHE PARISH SCHOOL SYSTEM**  
**Non-Instructional Personnel Observation Form**  
 (Counselor, Social Workers, Nurses)

**NAME** \_\_\_\_\_ **DATE** \_\_\_\_\_

**POSITION** \_\_\_\_\_ **EXPERIENCE** \_\_\_ 0 Years \_\_\_ 1-3 Years \_\_\_ 4+ Years

PERFORMANCE RESPONSIBILITIES (from job description)	OBS.	NOT OBS.	EVIDENCE
1.			
2.			
3.			
4.			
5.			

**COMMENDATIONS :**

**RECOMMENDATIONS :**

\_\_\_\_\_  
**EVALUATEE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**EVALUATOR**

\_\_\_\_\_  
**DATE**

Pre-observation conference: \_\_\_ YES \_\_\_ NO