

Buffalo State College Music Department
Observation Documentation

Name: _____ Date: _____

School: _____

Teacher: _____ Time: _____

Teacher Signature _____

Class Description (please circle): Pre-Kindergarten Elementary General Music
Elementary Band Elementary Choir Middle School General Music Music Theory
Middle School Choir Middle School Band High School Choir High School Band
Music In Our Lives Jazz Choir/Band Marching Band Other: _____

Reflection:

Number of hours observed in the class listed above: _____

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