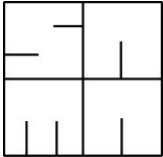


Today's Date: \_\_\_\_\_



**Southern Alleghenies Museum of Art**  
**ARTIST RESIDENCY PROGRAM**  
**Artist Observation Form**



Host Site Name: \_\_\_\_\_

Teacher(s): \_\_\_\_\_

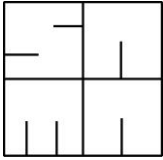
Name of Artist, Company or Ensemble: \_\_\_\_\_

Grade level(s): \_\_\_\_\_ Date of Observation: \_\_\_\_\_

Person filling out form: \_\_\_\_\_

		Lowest			Highest
1	Overall artist rating	1	2	3	4
2	Artistic quality	1	2	3	4
3	Organization of the core group/s	1	2	3	4
4	Communication skills	1	2	3	4
5	Modeling (dress, deportment, language, friendliness, etc.)	1	2	3	4
6	Evidence of preparation	1	2	3	4
7	Schedule of events	1	2	3	4
8	Content	1	2	3	4
9	Pace	1	2	3	4
10	Age-appropriateness of lessons/activities	1	2	3	4
11	Students were directly involved in the creative process (hands-on)	1	2	3	4
12	Participant reaction	1	2	3	4
13	The environment was conducive to art education	1	2	3	4
14	Availability of resources (classroom/artist materials)	1	2	3	4
15	Staff relationships	1	2	3	4

Today's Date: \_\_\_\_\_

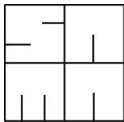


Southern Alleghenies Museum of Art  
**ARTIST RESIDENCY PROGRAM**  
**Artist Observation Form**



Please use this area to write any comments or observations:

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Return completed observation forms to:  
Southern Alleghenies Museum of Art, Pasquerilla Performing Arts Center,  
450 Schoolhouse Road, Johnstown, PA 15904

Phone: 814-269-7234 • Fax: 814-269-7240 • E-mail: [aie@sama-art.org](mailto:aie@sama-art.org)

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