|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Therapeutic Experience** (Intervention & description) | **DomainArea** | **Other Goal Areas Addressed** (If applicable) | **Procedure Observed** | **Additional Comments** (How might you incorporate this in your setting?) |
|  | Choose an item. |  |  |  |
|  | Choose an item. |  |  |  |
|  | Choose an item. |  |  |  |
|  | Choose an item. |  |  |  |
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|  | Choose an item. |  |  |  |
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|  | Choose an item. |  |  |  |

**Music Therapy Observation Reflection Worksheet** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **7. Differentiated Instruction:** List examples of how the music therapist challenges and support each student’s learning by providing appropriate content and developing skills which address individual learning differences.  |
| **8. Positive Learning Environment:** Describe the learning environment, and examples of how the teacher provides a well-managed, safe, and orderly environment that is conductive to learning and encourages respect for all. |
| **9. Additional Comments or Observations:**  |

MT-BC Observed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_ School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Observer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_ School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_