

**BRESCIA UNIVERSITY
SCHOOL OF EDUCATION
CLINICAL PRACTICE FORMATIVE EVALUATION**

EDU #13

_____ **University Supervisor**

_____ **Content Faculty**

Please rate your teacher candidate on the following grading scale and share the results with that teacher candidate as soon as possible

Rating Scale: 1 = Beginning; 2 = Developing; 3 = Accomplished; 4 = Exemplary

Teacher Candidate: _____ Grade _____
 Agency/School _____ System/City _____ Subject _____
 Cooperating Teacher _____ Time _____

	Rating	Comments
Professional Attitude/Dispositions		
a. Appropriate Attire/Neatness/Cleanliness		
b. Poise/Self-Control		
c. Punctuality/Dependability/Initiative		
d. Collaboration		
Designs/Plans and Implements/Manages Instruction		
a. Preplanned/Prepared		
b. Aligned with Kentucky's Core Academic Standards		
c. Planned for learning and cultural diversity		
d. Formative & Summative Assessments		
e. Multiple levels & higher order thinking tasks		
f. Integrate technology to address diverse student needs		
g. Connections with real-life situations		
h. Inter-disciplinary connections		
i. Engages students at all levels		
Knowledge of Content		
a. Communicates accurate knowledge of content		
b. Oral/Written expression		
c. Summarizes, reviews, assesses		
d. Uses community/student/other resources		
e. Identifies (students' own) misconceptions		
f. Guides student understanding from various perspectives		
Learning Climate/Classroom Management		
a. Voice/Diction		
b. Vitality/Enthusiasm		
c. Facilitates mutual respect		
d. Communicates high expectations		
e. Positive classroom management/Fosters self-control		
f. Creative/Flexible use of time, space, materials		
Assessment		
a. Uses multiple assessments/data sources		
b. Uses/Analyzes assessment to improve instruction		
c. Communicates assessment results to students		
d. Promotes self-assessment		
Reflection/Professional Development		
a. Reflects on teaching		
b. Plans and implements changes based on reflection		
c. Accepts critical comment/Supervision		

COMMENTS:

Areas of strength:

Areas of growth:

Signature _____ Date _____