



# Handbook

Updated May 2024

#### Acknowledgements

Thanks to the following contributors for the revision of this handbook in 2021:

Joy Blosser, Harrisonburg City Public Schools Amy Bradley, Staunton City Schools Ann Conners, Harrisonburg City Public Schools Alison Cornish, Waynesboro City Schools Dara Hall, James Madison University Jennifer Jones, Shenandoah County Schools Beth Lehman, Bridgewater College Cathy Marston, Page County Schools Pari Paluszak, Mary Baldwin University Larry Shifflett, Rockingham County Schools Ronald Shultz, Eastern Mennonite University Lori Wall, Mary Baldwin University Jessica Wilkerson Callison, Augusta County Schools

Thanks to the following contributors to the initial development of this handbook in 2017:

Mentorship and Clinical Experience Team

Ann Conners, Harrisonburg City Public Schools Dara Hall, James Madison University Lauren Heberling, Augusta County Public Schools Alix Johnston, Rockingham County Public Schools Beth Lehman, Bridgewater College Tisha Moore, Staunton City Public Schools Ronald Shultz, Eastern Mennonite University Lori Wall, Mary Baldwin University

Representatives of the Institutions of Higher Education

Jean Hawk, Bridgewater College Rachel Potter, Mary Baldwin University Steve Purcell, James Madison University Cathy Smeltzer Erb, Eastern Mennonite University

# **Table of Contents**

MidValley Consortium Overview Mission and Vision Statement MVC Goals History of the MidValley Consortium Partner Members Organizational Structure The MVC Advisory Council	
MVC Mentorship and Clinical Experience Team (MCET)	8
MVC Budget	9
MVC Website and Calendar Evaluation of the MVC Co-Developed Guiding Policies and Processes Clinical Faculty Clinical Faculty Nomination Process Clinical Faculty Workshop Curriculum Development and Review Process Clinical Faculty Appointment and Status Honorariums for Cooperating Teachers and Clinical Faculty	10 10 10 10 10 10 10 10 11 11
Refresher Workshops	
Clinical Faculty Mentor Clinical Faculty Mentor Nomination Process	
Clinical Faculty Mentor Workshop	
Non-member Participation in MVC Workshops	
Field Experiences. Student Teaching Performance Assessments	
Determining and Reviewing Student Teaching Placements	
Cooperating Teacher and Clinical Faculty Evaluations	
Substitute Teaching	
Video/Audio Recording Policy	
Co-Developed Grants and Projects	
Grants	
CF Mentor Workshop	
CF Mentor/Mentee Workshop	
Virginia Best Practice Network: Cultural Competence	16
Early Field Experience Mentorship Modules	
Projects	

Assessment Tutorial	17
Ad Hoc Group Projects	17
Appendix A: Responsibilities of the Student Teacher	
Appendix B: MVC Budget	20
Appendix C: Practicum Student Information Form	21
Appendix D: SAMPLE Partnership Memorandum of Understanding (MOU)	23
Appendix E: MidValley Consortium Organizational Chart	26
Appendix F: MVC Mentorship and Clinical Experience	
Team Membership Responsibilities	27
Appendix G: Application for Clinical Faculty Appointment	28
Appendix H: SAMPLE Three-Year Appointment Letter	33
Appendix I: SAMPLE Three-Year Reappointment Letter	34
Appendix J: SAMPLE Non-Reappointment Letter	35
Appendix K: MidValley Consortium for	
Teacher Education Clinical Faculty Training	36
Appendix L: MidValley Mentor Program Application for	
Clinical Faculty Mentor Appointment	39
Appendix M: MidValley Consortium for	
Teacher Education Clinical Faculty Mentor Workshop	43
Appendix N: Clinical Faculty Refresher Workshop Summary	46
Appendix O: Observation Form	47
Appendix P Student Teaching Assessment	49

#### MidValley Consortium Overview

#### **Mission and Vision Statement**

The mission of the MidValley Consortium (MVC) for Teacher Education school division and educator preparation provider (EPP) clinical partnership is to create mutually beneficial candidate and novice teacher programs and practices that promote PreK-12 student learning and development.

The vision of the MidValley Consortium for Teacher Education is to collaboratively construct, implement, and monitor effective clinical preparation and mentorship experiences which develops the knowledge, skills, and professional dispositions necessary to positively impact P-12 students' learning and development.

# **MVC Goals**

The MidValley Consortium for Teacher Education is a collaborative effort of four institutions of higher education (IHE) and seven school divisions in the Shenandoah Valley. Its goals are to:

- develop a cadre of clinical faculty who are exemplary models of effective teaching and strong mentors for their student teachers,
- develop and nurture leadership and mentoring skills and abilities in clinical faculty, to support their work with pre-service and novice teachers
- respond to the needs of consortium members on matters of mutual benefit, including accreditation standards related to clinical partnerships, identification and training of clinical faculty, streamlining procedures related to fieldwork, and other identified areas of need
- facilitate greater cooperation and communication among consortium members.

# History of the MidValley Consortium

The clinical faculty program of the MidValley Consortium began as a pilot project of James Madison University through the leadership of Dr. Henry C. Bowers. In the spring of 1988, twenty-one cooperating teachers from the Augusta County, Harrisonburg City, and Rockingham County Schools participated in the original training sessions. From this beginning effort to train Clinical Faculty has evolved a program with the stated goal of improving the quality of field experiences for students preparing to become teachers.

During 1988-89, the first full year of operation, an additional 35 teachers participated in the training. In addition, the Consortium expanded its membership to include six school divisions and four teacher education institutions in the Shenandoah Valley. The local school divisions are: Augusta, Rockingham, and Shenandoah Counties; and Harrisonburg, Staunton, and Waynesboro City Schools. Bridgewater College, Eastern Mennonite University, James Madison University, and Mary Baldwin University are the

participating teacher education institutions. The membership remained the same until 2005, when Page County joined the Consortium.

A Consortium Steering Committee of college/university faculty and administrators and public school classroom teachers makes policy decisions. For example, MVC partners established mutual responsibilities and expectations for student teachers (see Appendix A).

The MidValley Consortium for Teacher Education has experienced a very successful partnership. During the first nine years, the Consortium trained and provided "refresher workshops" for 418 Clinical Faculty who supervise area student teachers.

Then, in 1997-98, the Consortium received one of two clinical faculty grants awarded by the State Council of Higher Education for Virginia (SCHEV). The funded project required Clinical Faculty to recommit to the program for a three-year term of appointment, participate in training to use a new performance assessment process for supervising and evaluating student teachers, accept one student teacher per year, and attend two of the annual refresher workshops during their term of appointment. Currently, clinical faculty teachers are only required to attend one refresher workshop within each three year appointment. This project resulted in a cadre of 327 "recommitted" Clinical Faculty trained in a performance assessment process that incorporates research and professional literature related to the Virginia Standards of Learning, the National Council for the Accreditation of Teacher Education (NCATE), the Interstate New Teacher Assessment and Support Consortium (INTASC), and the Educational Testing Service (ETS) Classroom Performance Assessments (Pathwise).

Through the 1997-98 SCHEV grant the Consortium also prepared a cadre of 22 highly qualified Clinical Faculty Trainers, who teamed with the Consortium Steering Committee to train the other Clinical Faculty in the new performance assessment process. The Clinical Faculty Trainers developed strong leadership skills and the ability to serve as effective mentors for their Clinical Faculty colleagues.

Over the next 20 years, the Consortium operated on a budget based on annual cash and in-kind contributions from school divisions and institutions of higher education (IHE). As part of this agreement, school divisions continued to support their own substitute teacher costs for teachers to attend workshops. The current annual operating budget as of 2017 is \$4850, which has remained the same since Page County joined the consortium in 2004-05 (see Appendix B).

Over the years, additional grants were awarded through the Virginia Department of Education for the Consortium to further develop its programs. The Help New Teachers Grant in 2007-08 created a mentor training for beginning new teachers for Augusta County Public Schools. In 2012, the Virginia Investment in Critical Clinical Faculty Training helped to expand the current clinical faculty training and assessments to early childhood special education. The MidValley Mentor Project in 2014-15 and the MidValley Mentor + Mentee Project in 2016 helped to further develop mentorship

workshops to promote novice teacher success. Each of these projects were shared statewide.

Ad Hoc Committees enable Consortium members to create timely solutions to areas of need. For example, the MVC practicum form (Appendix C) is used by member IHEs in lieu of background checks for early field experiences (prior to student teaching) as a result of work from an ad hoc committee between 2013-15, and conversations regarding collecting new teacher data began in 2014-15 as a result of ad hoc committee work.

In 2014 the Consortium recognized the need to revise the formative and summative assessment documents to better align with current CAEP, InTASC, and Virginia Teacher Performance Standards. Clinical Faculty were highly involved in the development, pilot, and revision process which included new observation, assessment, and reference guide tools with implementation during the 2016-2017 school year.

The Consortium continues to train approximately 50 Clinical Faculty per workshop each year. Thousands of teachers have been trained and over 700 trained teachers are available to host teacher candidates annually. The skills taught in clinical faculty training are essentially the same skills as those needed to mentor beginning teachers. Many of our Clinical Faculty do indeed serve as mentors to beginning teachers. In 2015, the Consortium added a two-day mentor workshop, developed as a result of the MidValley Mentor Project, to its annual calendar. This workshop provides mentors with additional skills to work with beginning teachers increasing teacher effectiveness and satisfaction for program completers and their employers.

In 2017, the Steering Committee was re-named to the Mentorship and Clinical Experience Team. This handbook was developed in 2017 and describes all pertinent information related to the consortium. It is updated on an ongoing basis and was revised in its entirety in 2021.

#### **Partner Members**

A Memorandum of Understanding (MOU) developed in 2017 defines the partnership of the following members (see Appendix D):

Bridgewater College James Madison University Augusta County Schools Page County Schools Shenandoah County Schools Waynesboro City Schools Eastern Mennonite University Mary Baldwin University Harrisonburg City Schools Rockingham County Schools Staunton City Schools

The IHEs and Local Education Agencies (LEA) share common expectations of candidate admission/entry, preparation, and exit requirements: candidate admission/entry aligns with CAEP and state admission standards, candidate preparation meets all program requirements as approved by the state, and candidate

exit requires successful completion of student teaching prior to being recommended for licensure to the Virginia Department of Education by the IHE.

# **Organizational Structure**

The MidValley Consortium for Teacher Education is guided by the decisions of the MVC Advisory Council. The purpose of the Advisory Council is to review policies and procedures of the Consortium, to ensure open communication and responsiveness, and to commit resources to the work of the Consortium. The critical work of the Consortium is performed by the MVC Mentorship and Clinical Experience Team (MCET). The purpose of this team is to implement the projects and programs initiated by the Advisory Council.

# The MVC Advisory Council

The Council meets annually to review committee reports and consortium activities, evaluate consortium initiatives, set goals, and approve the annual budget. This group may appoint ad hoc committees to address identified needs.

- <u>Membership:</u> At least one IHE representative from each EPP and at least one administrative representative from each of the seven school divisions. Each representative is asked to serve for a renewable three-year term. The Advisory Council is co-chaired by one IHE and one school division representative appointed at the annual meeting and rotated among the members for a two-year term. Co-chair appointments rotate alphabetically through the list of IHEs and school divisions with IHE terms beginning in odd years and LEA terms beginning in even years. A term ends after the fall annual meeting of the Advisory Council. The role of treasurer always resides with an IHE. An IHE administrative assistant or team member records the minutes. The MVC Mentorship and Clinical Experience Team participates with one or more representatives in the Advisory Council meetings. If additional committees are appointed they will be represented in the Advisory Council meetings.
- <u>Documentation</u>: Agendas for each meeting will be developed by the co-chairs and include the opportunity for all members to submit items for discussion. Any MVC member can contact their Advisory representative with items to be considered. The JMU MCET liaison prepares materials for the meeting as needed. Minutes are taken each meeting and must be approved by all team members within one week. Meeting notes are disseminated to the Advisory Council members and representatives.
- <u>Communication</u>: All decisions are co-constructed and arrived at through collaborative discussion. Throughout the year, if any member of the MVC has concerns regarding the partnership process, policy, or procedures, the co-chairs of the Advisory Council will be notified to address the concerns.

# MVC Mentorship and Clinical Experience Team (MCET)

The MCET creates and facilitates workshops to develop clinical faculty mentors for preservice and novice teachers.

- Membership: At least one IHE representative from each EPP and at least one • representative from each of the seven school divisions. School division representatives include representation from central office, school-based administration, and teachers (who have been trained as clinical faculty) as monitored by the Advisory Council. Team members are asked to commit to serve for at least one full three-year term, which can be renewed by their advisory council representative. Team members may be asked to serve an additional partial term (e.g. one or two years) to prevent too many changes in membership in any given year. The Advisory Council representative may change their MCET appointee as needed. The MCET membership determines the facilitation of meetings. A representative from JMU maintains the database and is the liaison between the MCET, Advisory Council, and Clinical Faculty. The JMU liaison prepares materials for MVC activities. One or more representatives of the MCET attends the Advisory Council meetings. Member responsibilities are determined by the MCET (see Appendix F).
- <u>Facilitators</u>: School divisions may appoint a clinical faculty member or administrator to serve as a facilitator for professional development activities who is not also serving as a MCET member.
- <u>Documentation:</u> Agendas for each meeting include the opportunity for all members to submit items for discussion. At the end of each meeting agendas are co-constructed for the next meeting date. Minutes are taken each meeting and must be approved by all team members within one week. Once approved, the minutes are distributed to the co-chairs of the Advisory Council to distribute to all Advisory Council members.
- <u>Communication:</u> Throughout the year, if any member of the MCET has ideas, suggestions, questions, or concerns, they can be discussed at the monthly meetings or through electronic communication. All team decisions are arrived at collaboratively. If a member has a concern that is not being addressed by the MCET, they will notify the co-Chairs of the Advisory Council.

# MVC Budget

Each EPP and school division contributes financially or in kind to the annual budget as indicated in Appendix B. The MCET member from Bridgewater College acts as the fiscal agent for the Consortium. The operating budget has remained consistent because the normal operating costs have not increased beyond the budget (e.g. costs of supplies, food for workshops). Additional projects are grant funded.

# **MVC Website and Calendar**

The MVC website is maintained on the JMU server at <u>http://www.jmu.edu/coe/esc/consortium.shtml</u>. The website includes informational links pertinent to the MVC operations including the annual Mentorship and Clinical Experience Team (MCET) calendar and member contacts.

# **Evaluation of the MVC**

The Advisory Council reviews the operations of the MVC during an annual meeting. This review may include surveys, focus groups, and an opportunity for discussion and questions at the MVC annual meeting. Upon completion of the review, the data will be used to set goals for the MVC and adjust operations as necessary. The IHEs will support an external review of the MVC at least every 5 years to provide additional insight for continual review and progress.

Any changes to the handbook, policies, or procedures related to the MVC are coreviewed, developed, and approved by the Advisory Council, MCET, and any Ad Hoc committees.

Throughout the year, if any member of the MVC has concerns regarding the partnership, policy, or procedures, the Advisory Council representative or MCET liaison can be notified and will then contact the appropriate parties to address the concern(s).

# **Co-Developed Guiding Policies and Processes**

# **Clinical Faculty**

#### **Clinical Faculty Nomination Process**

The MidValley Consortium trains and supports a cadre of over 700 clinical faculty who supervise area student teachers. Qualified teachers submit an application via their school-based administrator who approves and submits their application to their Advisory Council representative. The Advisory Council representatives submit approved applications to the MCET for their review. Seven applications are requested from each school division. The MCET liaison will contact the Advisory Council representatives if additional space is available. Approved applicants are then extended invitations to the annual training, and the Advisory Council representative is copied on the invitation. If applicants are not approved, they will be notified by their Advisory Council representative.

The qualifications and responsibilities of a clinical faculty member are outlined on the clinical faculty application (see Appendix G).

#### Clinical Faculty Workshop

Approved applicants complete two days of high-quality professional development workshop for mentoring student teachers. School divisions provide the substitutes for the teachers who participate.

The MCET reviews, revises, and facilitates the two-day Clinical Faculty workshop which focuses on mentorship skills, including using a growth model to provide continual feedback. Clinical Faculty become experts on the use of formative and summative assessment documents, which have been aligned with current CAEP, InTASC, and

Virginia Teacher Performance Standards. The workshop also includes the following topics:

- 1. the unique characteristics of student teachers;
- 2. principles of adult learning;
- 3. roles of student teachers, clinical faculty, and college/university supervisors;
- 4. preparing for and orienting student teachers;
- 5. specific observation strategies; critical communication skills;
- 6. pre- and post-conferencing techniques;
- 7. coaching and formative feedback strategies;
- 8. reflective teaching;
- 9. co-teaching;
- 10. working with "at-risk" and excellent student teachers;
- 11. writing evaluations and recommendations;
- 12. professionalism; and legal issues related to student teaching.

Attendance, professionalism, and active participation are necessary for successful completion of the professional development workshop. Upon completion, participants are appointed as Clinical Faculty for a three-year term and are provided a certificate of participation. Clinical Faculty receive an increased honorarium for mentoring student teachers.

#### Curriculum Development and Review Process

At the completion of each day of the Clinical Faculty Workshop, participants submit anonymous evaluative feedback, as well as personal reflection and goal setting at the conclusion (see Appendix K). The MCET reviews the data between the first and second workshop and adjusts the training curriculum to meet the needs of the participants.

MCET also reviews all of the data collected from each workshop (including day 1 and 2 data, overall reflection and goal setting data, and feedback from facilitators) and refines and revises the overall curriculum.

Ongoing program evaluation supports continuous changes made to the curriculum to include current research and evidence-based practices. For example, in 2019-20 MCET revised the curriculum to include learning intentions and subsequent activities related to cultural competence.

# Clinical Faculty Appointment and Status

On July 1 of the year they are trained, participants receive an appointment letter via email (see Appendix H). To maintain clinical faculty status, they must participate in at least one refresher workshop during their three-year appointment. On July 1 of the year they end their three-year appointment, they are sent a reappointment letter if they participated in at least one refresher workshop during their three-year appointment (see Appendix I). If Clinical Faculty do not maintain their status (see non-reappointment letter, Appendix J), they may retroactively regain their status by attending two refreshers in the next three-year cycle. However, if too much time goes by to warrant a retroactive

appointment (i.e. more than four years after non-reappointment letter) they can attend day one <u>only</u> of the Clinical Faculty Workshop to restart their appointment cycle.

# Honorariums for Cooperating Teachers and Clinical Faculty

As indicated in the MOU (Appendix D), the IHEs shall provide stipends/honorarium to school division personnel (teachers) who host student teachers. Since the inception of MVC, the EPPs have agreed to keep the amount of the honorarium consistent so as not to create competition for clinical experience placements. The honorarium is extremely nominal. Clinical faculty receive double the honorarium as cooperating teachers (untrained mentors for student teachers) based on their training and increased expectations.

Due to budget constraints, the honorarium was maintained at \$10/week for cooperating teachers and \$20/week for clinical faculty for over 20 years. However, in 2019-20 the EPPs agreed to increase the honorarium to \$15/week for cooperating teachers and \$30/week for clinical faculty.

# Refresher Workshops

All clinical faculty must attend at least one refresher workshop during their three-year term in order to be eligible for reappointment. Four refresher workshops are held at various locations throughout the consortium school divisions each year. A relevant theme for the year is identified, developed, and facilitated by the MCET. Each fall the MCET liaison notifies active Clinical Faculty of the workshop schedule for the year through electronic communication. Pre-registration is requested but not required. See Appendix N for a list of workshop topics.

# **Clinical Faculty Mentor**

#### Clinical Faculty Mentor Nomination Process

The MidValley Consortium trains and supports clinical faculty mentors who mentor new teachers. Qualified clinical faculty submit an application via their school-based administrator who approves and submits their application to their Advisory Council representative. The Advisory Council representatives submit approved applications to the MCET for their review. Seven applications are requested from each school division. The MCET liaison will contact the Advisory Council representatives if additional space is available. Approved applicants are then extended invitations to the annual training, and the Advisory Council representative is copied on the invitation. If applicants are not approved, they will be notified by their Advisory Council representative.

The qualifications and responsibilities of a clinical faculty mentor are outlined on the clinical faculty mentor application (see Appendix L).

#### Clinical Faculty Mentor Workshop

Approved applicants complete two days of high-quality professional development for mentoring new teachers. School divisions provide the substitutes for the teachers who participate.

The MCET reviews, revises, and facilitates the two-day Clinical Faculty Mentor workshop which focuses on types of feedback, approaches to mentoring, the role of personality in communicating with others, the difference between coaching and mentoring, and building relationships. The workshop curriculum has been aligned with current CAEP, InTASC, and Virginia Teacher Performance Standards and includes the following topics:

- 1. the unique characteristics, development, and challenges of new teachers;
- 2. principles of mentorship;
- 3. building trust and sustaining relationships;
- 4. coaching and mentoring conversations;
- 5. observation strategies;
- 6. data driven conversations;
- 7. video observations and coaching; and
- 8. establishing an electronic community of practice.

This professional development workshop replaces the need for a refresher workshop within the participant's three-year clinical faculty appointment. For additional mentorship support, in 2016 the MVC developed the Mentor+Mentee Workshop as a continuation of professional development for the school divisions to implement as appropriate.

At the completion of each day of the Clinical Faculty Mentor Workshop, participants submit anonymous evaluative feedback, as well as personal reflection and goal setting (see Appendix M). The MCET reviews the data and adjusts the training to meet the

#### Non-member Participation in MVC Workshops

Occasionally individuals from outside of the consortium who are interested in the work of the MVC request to attend an MVC Workshop. The request is discussed during MCET meetings. We try to keep this attendance minimal due to the costs. If the participant is a cooperating teacher from a non-consortium division but hosts many of our students, we reserve the right to permit them to attend. If the participant is interested in using all or part of our curriculum for their own EPP/division/state, they must give credit to MVC in their documents.

# **Field Experiences**

#### Student Teaching Performance Assessments

MVC members co-created the Performance Assessment tools that are used during student teaching and co-revise them on an ongoing basis for candidates from all EPPs. These tools include an observation form (see Appendix O), assessment of student

teaching *Profile of Student Teaching Performance* (see Appendix P), and reference guides for endorsement areas (see consortium website). The formative assessments provide a way for the triad (university supervisor, cooperating teacher/clinical faculty, student teacher) to evaluate the performance and dispositions of the student teacher. These data help determine whether student teaching has been successfully completed.

The assessment is:

Compatible with teaching and learning process Compatible with supervision process Performance-based Reflective, formative Performance levels clearly described Valid and reliable

The assessment is based on preparation consistent with professional guidelines & standards including:

college/university conceptual frameworks InTASC-Interstate Teachers Assessment and Support Consortium CAEP – Council for the Accreditation of Educator Preparation NBPTS-National Board for Professional Teaching Standards Virginia Performance Standards: Guidelines for the Uniform Performance Standards and Evaluation Criteria for Teachers local school initiatives clinical faculty feedback

MVC created a tutorial for all triad members to review best practices in observing, assessing, and giving feedback to student teachers. See <u>https://teach.coe.jmu.edu/mvc-training/</u>.

#### Determining and Reviewing Student Teaching Placements

School divisions select their strongest mentors to be trained as Clinical Faculty. The IHEs request placements with active Clinical Faculty whenever possible, requesting teachers who would be the best match for a prospective student teacher.

In the spring, prior to the expected placement year, the IHEs meet to review active clinical faculty (called the 'draft') in order to collaboratively request placements for each of the local student teachers to try to prevent asking for the same placements in an effort to help school divisions with the placement requests. All IHEs agree to submit requests for only those student teachers who the IHE anticipates will be eligible to student teach. IHEs submit requests to the local school divisions for the entire following school year, whenever possible.

School divisions match requests with eligible Clinical Faculty. If eligible Clinical Faculty teachers are not available, the school division will match student teachers to cooperating teachers who meet the minimum requirements to host a student teacher as outlined in the student teaching placement request.

Once a school division provides the IHE with a list of confirmed placements, confirmation is sent to the student teacher and to the cooperating teacher.

Concerns about a student teacher and/or university supervisor expressed by a cooperating teacher and/or other school division personnel will be directed to the appropriate IHE contact. A plan of action is developed collaboratively to address the identified concern.

#### Cooperating Teacher and Clinical Faculty Evaluations

Each IHE conducts cooperating teachers/clinical faculty evaluations from the student teacher and the university consultant. These data are collated and analyzed within the IHE. In order to maintain confidentiality of respondents, data results are not released to cooperating teachers/clinical faculty as these teachers might someday become colleagues of the student teacher. When concerns arise in the data that warrant action by the school division, the MVC IHE representative will reach out to the point of contact as identified by each LEA and school based administrator.

#### Substitute Teaching

Each IHE has their own substitute teaching policy during the student teaching experience; however, MVC participants have agreed on the following overarching principles:

- Student teachers should not be asked to be a substitute outside of the classroom in which they are placed;
- If asked to be a substitute, student teachers must be credentialed and paid by the school division as a substitute;
- If the student teacher is not formally hired as the substitute in his/her classroom, then a substitute must be present;
- The decision to allow a student teacher to substitute for his/her cooperating teacher should be made cooperatively by the student teacher, cooperating teacher, building administrator, program coordinator, and university supervisor;
- Student teachers may elect not to serve as a substitute without repercussion. School divisions and/or building administrators may elect not to ask a student teacher to serve as a substitute and instead hire someone else to serve as a substitute teacher; and
- The school division assumes legal liability for any student teacher serving as a substitute teacher.

#### Video/Audio Recording Policy

The following co-constructed policy was agreed to by all consortium members, except Augusta County Public Schools (ACPS):

Video recording and/or digital photographs of classroom lessons taught by student teachers are used to improve instruction and for educational purposes

only. Video recordings/photos will focus on the instructor. While it is possible that some students may appear, videos/photos will be kept confidential at all times and will not be made public in any way.

For placements made with ACPS, EPPs will continue to require field experience students to use the division form.

# **Co-Developed Grants and Projects**

The MVC members contribute to co-constructed grants and projects as a means of continuously improving mentorship and clinical experience practices.

# Grants

A summary of the recent grant projects are included below, for more information please contact a current member of the consortium:

# CF Mentor Workshop

In 2014-15, the *MidValley Mentor Project (MVMP)* identified, recruited and trained selected Clinical Faculty (CF) to better mentor beginning teachers in identified critical shortage areas and supported these mentors by designing and developing an electronic community of practice. This effort expanded and deepened the existing training provided by MidValley Consortium Clinical Faculty Program to increase the number of clinical faculty equipped to mentor beginning teachers in their school divisions.

# CF Mentor/Mentee Workshop

In 2016, the MidValley Mentor + Mentee Project had two primary components – (1) To improve clinical experiences for pre-service teachers by developing updated reference guides for student teaching assessments in all teacher licensure areas, including critical needs licensure areas. Clinical faculty joined higher education faculty to develop these guides; and, (2) To extend the mentor workshop developed in 2014-15 to include mentor and mentee pairs and extend the relationship past the first year of teaching for improved instructional success, retention in the field, and student learning. Mentors and mentees from the past year attended a 2-day workshop and the curriculum used was shared with all participating school divisions for continued use.

# Virginia Best Practice Network: Cultural Competence

In 2019, the MVC collaborated with Virginia Clinical Faculty/New Teacher Mentor Best Practices Network (VBPN) to develop a report entitled *Guidelines and Framework for Developing Diverse, Culturally and Linguistically Competent Clinical Faculty* (see <u>https://jmu.edu/coe/esc/\_files/guidelines-and-framework-for-cultural-competence.pdf</u>). Additionally, MVC members offered a webinar to Virginia teachers and have presented this information at local, state-wide, and national conferences.

# Early Field Experience Mentorship Modules

Beginning in December 2019, the MidValley Early Field Experience Mentorship Project (MEFEM) was developed to increase the number of highly effective mentors available to prepare preservice teachers, and seek to impact instructional performance and professional dispositions in teacher candidates in participating school divisions. The MEFEM project accomplished this by: 1) deepening evidence-based content pedagogy usage among already expert clinical faculty and their early field experience mentees, 2) improving preservice learning experiences by maximizing the clinical experience, and 3) creating accessible, web-based modules. MEFEM identified and supported selected Clinical Faculty (CF) in several consortium divisions to further their mentoring of teacher candidates in identified critical shortage areas in developing this project. These modules are meant to be accessible for all cooperating teachers and clinical faculty who mentor a candidate in an early field experience. See

https://teach.coe.jmu.edu/mvc-early-field-experience-training/.

# Projects

# Assessment Tutorial

In 2017, MVC created a tutorial for all triad members to review best practices in observing, assessing, and giving feedback to student teachers. See <a href="https://teach.coe.jmu.edu/mvc-training/">https://teach.coe.jmu.edu/mvc-training/</a>.

# Ad Hoc Group Projects

As indicated in the History section and in Appendix E, ad hoc groups of MVC Advisory and MCET are created to address identified needs by both the IHEs and the member school divisions.

One of the primary working documents created from an ad hoc group is the *Practicum Student Information Form* (Appendix C). All school divisions agreed to use this document in lieu of a background check during early field experience. This form is regularly reviewed and updated with advisory council approval.

Other examples of ad hoc group work include conversations during the COVID-19 pandemic related to field experiences, vaccinations, and to develop *Guidelines for Mentorship in a Virtual (or Hybrid) Experience.* 

# Appendix A: Responsibilities of the Student Teacher

Prior to the Student Teaching Experience, the student teacher is responsible for:

- 1. Contacting the cooperating teacher/clinical faculty to get acquainted in a person-toperson setting and to provide pertinent background information.
- 2. Obtaining school-wide instructional goals, curriculum guides and outlines, and course objectives for the classes with which he or she will be working.
- 3. Arranging to obtain and become acquainted with faculty and student handbooks.
- 4. Participating in orientation programs scheduled by the school division and consortium personnel.
- 5. Providing transportation to and from assigned school including all professional responsibilities such as teachers' meetings, workshops, etc.
- 6. Becoming familiar with the student teacher expectations, procedures, guidelines and evaluations requested by the consortium and the school division in which he or she is assigned.

During student teaching, the student teacher is responsible for:

- 1. Planning & Instruction:
  - a. Making necessary arrangements to work with before and after school and during the cooperating teacher's planning period. The student teacher should make arrangements to attend all school functions such as PTA meetings, faculty meetings, and other events that teachers are normally expected to attend.
  - b. Planning units and daily lessons in advance of the teaching assignments. All plans should be approved by the cooperating teacher. Arrangements should be made to discuss and review teaching ideas and plans to be used the following week.
  - c. Providing lesson plans for the class when absent from school due to illness or emergency. The student teacher must notify the cooperating teacher and make arrangements to provide a copy of the lesson plans and supplemental materials.
- 2. Classroom and Instruction Responsibilities:
  - a. Being thoroughly familiar with effective classroom management techniques and skills and how to incorporate them into the teaching responsibilities.
  - b. Becoming familiar with a variety of teaching strategies suitable for all students in the assigned class.
  - c. Being familiar with all school policies and the procedures for reporting all infractions to appropriate school personnel. This is one responsibility expected of all school personnel and you must assume this responsibility.
  - d. Establishing a climate of mutual respect, where students address you as Mr., Mrs., Miss, or Ms.
  - e. Being organized and prepared to start each class on time.
  - f. Making sure that each instructional group clearly understands the expectations, the materials and equipment to be used for each activity.
  - g. Becoming familiar with the school's grading and evaluation guidelines.
  - h. Expressing acceptance or non-acceptance of inappropriate behavior to students both verbally and non-verbally as the situation requires. Positive feedback should be encouraged.
  - i. Seeking guidance, assistance and feedback during the student teaching experience in dealing with established policies and practices.

- j. Observing your cooperating teacher and other teachers in the school. Attention should be focused specifically on the teacher's use of lesson design, methods and materials, and classroom management techniques. Be prepared to ask questions and discuss your perceptions of these techniques with the teachers following an observation lesson.
- k. Taking the initiative in seeking help from your cooperating teacher.
- I. Becoming familiar with materials available outside your classroom that can assist you in your planning and teaching responsibilities.
- m. Creating new materials and activities with the assistance of the cooperating teacher in carrying out your teaching responsibilities.
- n. Being flexible in adjusting teaching plans to deal with unexpected interruptions.
- 3. Demonstrating Professionalism:
  - a. Reporting for school duties when expected and being on-time each day. The length of the student teacher's day will correspond to that of the clinical faculty member.
  - b. Meeting the standards of dress, personal appearance, professional behavior and performance expected of the school staff to which you are assigned. Remember that you are now a professional and students and teachers will be observing and modeling your actions.
  - c. Placing school duties ahead of personal wishes and accepting responsibilities which are a necessary part of the profession. The student teacher cannot expect to enroll in additional coursework, outside work or to participate in excessive extracurricular activities during the student teaching experience. Only in exceptional cases will additional coursework, outside work, etc. be approved during the student teaching experience. Prior written approval is required.
  - d. Refraining from administering corporal punishment. Student teachers are not to use abusive language, profane or otherwise, even in jest.
  - e. Attending professional meetings, such as PTA meetings, faculty meetings, district-wide meetings, etc. Student teachers are expected to take an active part in extra-curricular activities of the school to which they are assigned. The student teacher is expected to participate in all teacher work days, parent conference days, class trips, etc. in which the clinical faculty member participates. These activities are an important part of your professional development program.
  - f. Following the holiday and vacation schedule of the public school to which you are assigned. Follow the school policy for teachers in dealing with inclement weather incidents.
  - g. Notifying the clinical faculty member and the consortium consultant in case an emergency or illness occurs. The student teacher should have all emergency numbers readily available.
  - h. Safeguarding all personal and confidential information and using it for professional purposes only. The student teacher is expected to avoid unfavorable criticism of the participating school, the clinical faculty member, and the community. The student teacher is not to talk with students about other students or about staff members.
  - i. Completing all forms as required.

#### Appendix B: MVC Budget

#### **Operating Budget: \$4850**

Printing and supplies	1150
Food service	3600
Miscellaneous	100

#### **Recommendation:**

- 1. That all facilitator costs continue to be provided by the college/university as in-kind contributions.
- 2. That each school division continues to support its own substitute teacher costs.
- 3. That JMU continue to provide in-kind support through coordination of activities and clerical, database and Web support in lieu of monetary contribution for support of Consortium activities.
- 4. That BC continue to provide accounting support as in-kind contribution, with an appropriate adjustment to its monetary contribution for support of Consortium activities.
- 5. That college/university and school division contributions toward the Consortium operating budget be pro-rated as follows:

Bridgewater College	350
Eastern Mennonite University	500
Mary Baldwin University	500
Augusta	500
Harrisonburg	500
Page	500
Rockingham	500
Shenandoah	500
Staunton	500
<u>Waynesboro</u>	<u>500</u>
Total	4,850

# **Appendix C: Practicum Student Information Form**

Bridgewater College	Eastern Mennonite University	James Madison University
Mary Baldwin University	Augusta County Schools	Harrisonburg City Schools
Page County Schools	Rockingham County Schools	Staunton City Schools
Shenandoah County Schools	Waynesboro City Schools	·

#### Practicum Student Information Form

All applications must be filled out completely, or they will not be processed. Please return this completed form to your course instructor who returns it to the field placement coordinator or administrative assistant at your university. Questions regarding the practicum policy can be directed to the Director of Teacher Education or designated contact.

Name:					
First		Middle		Last	
Student Address:					
Phone Number: (Cell)	(F	Permanent Home)	Email:		
Emergency Contact Name:		Emergency	Contact Phone Numb	er:	
Do you have a valid driver's li		License I.D. number			
	No	Expiration date	Issuin	g state	
Practicum Course Information					
Have you ever been convicted of	f, or entered a ple	a of guilty or no contest to, a	felony?	Yes	No
Have you ever been convicted of	f, or entered a ple	a of guilty or no contest to, a	criminal offense in	Yes	No
another country? Have you ever been convicted of		a of guilty or no contest to, a	misdemeanor	Yes	No
<u>involving a child (minor) or a st</u> Have you ever been convicted o		a of guilty or no contest to, a	misdemeanor	Yes	No
involving drugs (excluding offer marijuana)?	ises related to alc	ohol or possession of one our	ice or less of	_	
Have you ever been the subject	of a founded com	plaint of child abuse or negle	ect by a child	Yes	No
protection agency?				_	
Have you ever had a teaching, a			I	Yes	No
certificate or license revoked, su territory, or country; surrender					
any other adverse action taken :					
warning, or reproval and any or					
Have you ever had a teaching, a		• • •	I	Yes	No
certificate or license revoked, su territory, or country; surrender					
any other adverse action taken a		J	<i>,</i>		
warning, or reproval and any or					
Have you ever left any education	n- or school-relat	ed employment, voluntarily (	or involuntarily,	Yes	No
under any of the following circu	mstances: (1) wh	ile the subject of a review, in	quiry, investigation,		
or appeal of alleged misconduct	; (2) when you ha	d reason to believe a review,	inquiry,		
investigation or appeal of allege	d misconduct wa	s under way or imminent; or	(3) while any		
administrative or judicial proce	eding involving a	n allegation of misconduct w	as pending, eligible		
for appeal, or under appeal? <u>Pl</u>	<u>ease note</u> : This i	ncludes any open investigatio	on by or pending		
proceeding with a child protecti	on agency and ar	y pending criminal charges.			
ridgewater College Ea	stern Mennonite Uni	versity James Madis	on University	Mary Baldwin U	niversity
	. Hølly Rusher	Dr. Dara Hal		Dr. Pari Paluszal	ε
	0-432-4638 lly.rusher@emu.edu	540-568-299 halldm@imu		540-887-7185 plpaluszak@mar	ubaldaria ada
jonesizionagewater.edu	ny.rusner@enu.euu			piparuszakigimai	yoalawin.edu
R DIRECTOR OF TEACHER EDUCA	TION or Designee (If	student checked 'yes' to questions)	Approve for practicum expe	rience?Yes!	No
ison: pproved, contacted School Division C	outral Office to com	firm (include name and date of ear	admth.		
pproved, contacted School Division C nature	entral Office to Com	nrm (include name and date of co Date	diacij		

If yes, please explain, and give dates of conviction, type of conviction, and jurisdiction where convicted.\_

(Please use additional sheet if necessary) If you answered "Yes" to any of the above questions contact the Director of Teacher Education or designee below.

A practicum/clinical field experience is defined as a field experience for teacher candidates to develop and demonstrate their knowledge, skills, and professional dispositions in a variety of settings that are appropriate to the content and level of their program. Teacher candidates can develop proficiencies through observation, instruction, tutoring, and active participation in their assigned placement. The safety and security of the school community is a top priority of the MidValley Consortium. Anyone convicted of a misdemeanor or felony offense, especially an offense against a minor, may be disqualified from volunteering depending upon the nature of the offense and/or volunteer activity.

The statements made by me in this application are true and complete to the best of my knowledge. I understand that any willful misstatements or material omission on this application will be considered sufficient cause to disqualify me for volunteer opportunities. During such times as I am a participant in a field experience, I agree to assume full responsibility for such participation and release the school division from any damages which I may sustain thereby. I fully understand that if services are no longer needed, or my performance is not acceptable, the school or division and/or my college/university has the right to terminate my services as required and without notice.

Signature\_

Date\_\_\_



Appendix D: SAMPLE Partnership Memorandum of Understanding (MOU) 2019-2021

The MidValley Consortium (MVC) for Teacher Education is a collaborative effort of four colleges and universities and seven school divisions in the Shenandoah Valley. In an effort to formalize this partnership and to establish procedures for on-going communication through input and shared decision-making, this MOU serves to articulate the responsibilities and expectations of members of the consortium.

The goals of the MVC are to foster collaborative partnerships in order to:

- Develop a cadre of trained clinical faculty who are exemplary models of effective teaching and strong mentors for their student teachers
- Develop and nurture leadership and mentoring skills and abilities of clinical faculty, to support their work with pre-service and novice teachers
- Respond to the needs of the consortium members on matters of mutual benefit, including accreditation standards related to clinical partnerships, identification and training of clinical faculty, streamlining procedures related to fieldwork, and other identified areas of need
- Facilitate greater cooperation and communication among consortium members

The MVC shall include two standing subgroups that engage in collaborative practices for meeting the above goals:

- The MVC Advisory Council shall be made up of at least one institutional representative from each of the four colleges and universities, and at least one administrative representative from each of the seven school divisions, with one partnership vote for each of the eleven Consortium Members. The purpose of this group is to review policies and procedures of the MVC, to ensure open communication and responsiveness, and to commit resources to the work of the MVC. This group may appoint additional committees to address identified needs. (Furthermore, the deans/directors of the respective colleges and universities shall meet on an ongoing basis for discussion, evaluation, and goal-setting.)
- The MVC Mentorship and Clinical Experience Team shall be made up of at least one representative from the colleges and universities. All Local Education Agencies (LEAs) will be invited to be represented. The purpose of this committee is to co-identify and co-train new and established clinical faculty for the important work of mentoring and supporting student teachers. Additionally, this team also provides further professional development to clinical faculty in the area of mentoring new teachers and other projects related to the MVC mission.

Roles and Responsibilities of the Institutions of Higher Education (IHEs)

- The IHEs in the MVC shall include Bridgewater College, Eastern Mennonite University, James Madison University, and Mary Baldwin University.
- The IHEs will appoint members to each MVC committee.

- The IHEs shall work with school division personnel for the placement of practicum students and student teachers, providing requests with sufficient notice.
- The IHEs shall work with school division administrators and clinical faculty to provide mentorship and supervision to student teachers, and shall be responsive to addressing matters of concern.
- The IHEs shall provide stipends/honorariums to school division personnel (teachers) who host student teachers. These stipends/honorariums are allocated from each IHE's operating budget and are separate from the consortium budget.
- The IHEs shall support the work of the MVC Mentorship and Clinical Experience Team to train clinical faculty.
- The IHEs shall also support the work of the MVC Mentorship and Clinical Experience Team in their efforts to provide professional development for clinical faculty serving as mentors for new teachers.
- The IHEs shall solicit feedback and input from the school divisions at regular intervals and work, through their role on the MVC Advisory Council, to offer responsive solutions for furthering collaboration to support mutually beneficial practices.
- One of the IHEs shall manage bookkeeping for the budget of the MVC.
- One of the IHEs shall handle administration/coordination of scheduling and other administrative tasks of the MVC.
- One of the IHE institutional representatives shall co-chair the MVC Advisory Council with an LEA representative as co-chair.

Roles and Responsibilities of the School Divisions/Local Education Agencies (LEAs)

- The LEAs in the MVC shall include the counties of Augusta, Page, Rockingham, and Shenandoah, and the cities of Harrisonburg, Staunton, and Waynesboro.
- The LEAs will appoint members to each MVC committee.
- The LEAs shall work with the IHEs to place practicum students and student teachers within their school division, giving priority to placing student teachers with clinical faculty who have demonstrated effectiveness in the classroom as indicated by a proficient or exemplary evaluation rating.
- The LEAs shall communicate confirmation of such placements with the IHEs in a timely manner.
- The LEAs shall work with IHEs to co-select clinical faculty through a process of recommendations and solicitation of interest.
- The LEAs shall work with IHEs to evaluate the effectiveness of clinical faculty.
- The LEAs shall work with the IHEs to maintain a current list of active clinical faculty.
- The LEAs shall support the work of the MVC Mentorship and Clinical Experience Team to train clinical faculty, and shall allow professional leave and cover the cost of substitutes for teachers attending such trainings.
- The LEAs shall support the additional work of the MVC Mentorship and Clinical Experience Team in their efforts to provide professional development for clinical

faculty serving as mentors for novice teachers, and shall allow professional leave and cover the cost of substitutes for teachers attending such trainings.

- The LEAs shall provide regular feedback to the IHEs regarding any matters of mutual concern including, but not limited to: the teacher preparation program, particular needs related to hard-to-fill vacancies, the fieldwork/placement request process, and the communication process.
- The LEAs shall support the IHEs in their work to collect data regarding the effectiveness of completers, for the purposes of accreditation, by co-establishing agreeable procedures.
- One of the LEA representatives shall co-chair the MVC Advisory Council with a IHE institutional representative as co-chair.

The undersigned, as representatives of their IHEs or LEAs, agree to the above expectations and responsibilities of the MVC. This agreement shall be reviewed biennially.

IHE or LEA	Name of Representative (Printed)	Title	Signature & Date
Bridgewater College			
Eastern Mennonite University			
James Madison University			
Mary Baldwin University			
Augusta County Schools			
Harrisonburg City Schools			
Page County Schools			
Rockingham County Schools			
Shenandoah County Schools			
Staunton City Schools			
Waynesboro City Schools			

#### Appendix E: MidValley Consortium Organizational Chart

# MidValley Consortium Advisory CouncilIHE Deans and Directors plus one representative each<br/>from:Augusta County SchoolsShenandoah County SchoolsAugusta County SchoolsStaunton City SchoolsHarrisonburg City SchoolsStaunton City SchoolsPage County SchoolsWaynesboro City SchoolsRockingham County SchoolsIHE Dean / Director serves as Co-ChairLEA Representative serves as Co-Chair

#### **MVC Mentorship and Clinical Experience Team**

Purpose:

- 1. Co-identify and co-train new and established clinical faculty for the important work of mentoring and supporting student teachers.
- 2. Provide further professional development to clinical faculty in the area of mentoring novice teachers and to support collaborative learning experiences for mentor-menteeteams.

Membership: representatives from each of the 4 IHEs and representatives from each of the 7 school divisions

# Ad Hoc Committee(s)

Purpose: to address identified needs by both the IHEs and the member school divisions.

# Appendix F: MVC Mentorship and Clinical Experience Team Membership Responsibilities

The MidValley Consortium Advisory Council, with representatives from seven school divisions and four institutions of higher education, support and direct the activities of the MVC Mentorship and Clinical Experience Team.

Members of the MVC Mentorship and Clinical Experience Team are nominated by their respective representative(s) because of their knowledge and experience with:

- (a) the MVC clinical faculty program; and/or
- (b) preservice teacher preparation and clinical experiences; and/or
- (c) mentoring preservice and/or beginning new teachers.

Team members are a work group, collaborating to plan, develop, and facilitate consortium programs and projects as directed by the Advisory Council.

Team members participate in meetings, refresher workshops, and full-day clinical faculty and mentor workshops, which generally take place on Wednesdays. Team members are asked to commit to attending the following each year:

- 1. Monthly committee meeting 4:15-5:30 at Bridgewater College.
- 2. At least one refresher workshop 4:15-5:30 in schools around the consortium area.
- 3. At least two of the four workshop days per year.

One or two meetings are held with the Advisory Council each year, with other additional meetings scheduled on an ad hoc basis, and team members may be asked to participate if their schedule permits.

Team members are active participants in all meetings they attend, willing to share their ideas, insights, and perspectives. Team members help to co-construct the programs and projects they are working on.

Team members facilitate workshops and actively participate in workshop discussions, as well as help to evaluate the program for revision.

Additionally, although meeting minutes are shared with the advisory council, team members will remain in communication with their advisory council representation regarding information discussed at meetings.

Stability in the team is important for workshop facilitation. Therefore, team members are asked to commit to serve for at least one full three-year term, which can be renewed by their advisory council representative. Team members may be asked to stay for an additional partial term (e.g. one or two years) to help prevent too many changes in membership in any given year.

#### **Appendix G: Application for Clinical Faculty Appointment**

#### (*Please return this application directly to your building principal <u>by the date</u> <u>determined by your school division</u> — do <u>not</u> mail it directly to the MidValley Consortium)*

#### PART A. TO BE COMPLETED BY TEACHER

Name	Preferred name	
Date Last 4 digits SSN	E-mail	
School Division	School	
Home Address		

# Please read the attached description of Clinical Faculty responsibilities and qualifications and then complete the following:

I wish to apply for the Clinical Faculty program. I understand that:

- a. I must attend the equivalent of a two-day training session, which may be scheduled in differing formats (all-day with substitute, half-day during teacher workday, after-school, etc.), depending on school division or college/university calendars.
- after successfully completing this training session, I will receive a three-year Clinical Faculty appointment. As part of this appointment I will agree to supervise one student teacher per year (if needed) and will attend at least one of the refresher sessions every 3 year cycle of appointment. I also understand that I will begin receiving a \$30/week stipend/honorarium for supervising student teachers *after* completing the training session.

Current teaching assignment [grade/subject area(s)]
Under continuing contract in division:YesNo
Number of years in current teaching assignment
Total number of years teaching
Licensure area(s)
Type of license held
Highest degree earned
Please indicate the name of the institution of higher education that you attended:
Undergraduate Institution
Graduate Institution
Licensure Institution (if different than above)

List the major professional growth and in-service activities in which you have been involved during the last three years:

What recent experience do you have in working with adults and/or student teachers?

What are your areas of special professional expertise? Would you be willing to share ideas with others, such as university classes or with peers?

#### PART B. TO BE COMPLETED BY PRINCIPAL

	_Yes	_ No	Does this teacher hold a valid Virginia license with proper endorsement for the teaching assignment?
	_ Yes	_ No	
	_ Yes	_ No	Does this teacher show expertise in subject matter knowledge and delivery?
	Yes	_ No	
	Yes	_No	Does this teacher show a desire, willingness, and ability to work cooperatively with colleagues and student teachers?
	Yes	No	
	Yes		
			Does this teacher have strong organizational skills?
	Yes	No	Does this teacher have knowledge of school/community resources?
	_ Yes	_ No	Does this teacher have skill in effective classroom management techniques?
	Ye N		I recommend this teacher for the Clinical Faculty program. I do not recommend this teacher for the Clinical Faculty program.
Com	ments:		

Name
------

Signature \_\_\_\_\_

#### PART C. TO BE COMPLETED BY CENTRAL OFFICE PERSONNEL

\_\_\_\_Yes \_\_\_\_No I recommend this teacher for the Clinical Faculty program. I do not recommend this teacher for the Clinical Faculty program.

Comments:

Name \_\_\_\_\_\_

Signature \_\_\_\_\_

#### PART D. TO BE COMPLETED BY MIDVALLEY MENTORSHIP AND CLINICAL EXPERIENCE TEAM

\_\_\_\_Yes \_\_\_\_ No We recommend this teacher for the Clinical Faculty program. We do not recommend this teacher for the Clinical Faculty program.

Comments:

Notification sent\_\_\_\_\_ Date of Appointment \_\_\_\_\_

#### **Responsibilities of Clinical Faculty**

The following Clinical Faculty responsibilities have been organized in a format consistent with the teaching/learning process and the major categories of the performance assessment instrument.

#### 1. <u>Planning and the Student Teaching Experience</u>

- **a.** Plan and provide the student teacher with an initial orientation to the assigned school and the classroom.
- b. Meet with the student teacher to provide and discuss basic instructional materials, faculty and student handbooks; to share an overview of the school faculty and the working relationships in the school; and to make plans and review expectations for class(es).

- **c.** Orient the student teacher to the school planning process; help the student teacher establish objectives for the pupils; and provide specific expectations and deadlines for daily lesson plans, unit plans, and student evaluation.
- **d.** Plan with the student teacher and the college/university supervisor for the student teacher's early induction into the teaching process and gradual assumption of full responsibility for classroom instruction.
- e. Plan with the college/university supervisor to provide a continuous evaluation of the student teacher's performance in all phases of teaching and to meet all Consortium evaluation requirements.

#### 2. <u>Climate and the Student Teaching Experience</u>

- **a.** Develop and provide a teaching/learning atmosphere that supports dialogue and discussion, shares advice and constructive feedback, and encourages open communication for the student teacher's self-reflection and professional growth.
- b. Establish a teaching/learning climate that is conducive to student learning and that allows the student teacher to develop skills in planning and provides opportunities for him/her to test theory and practice in the classroom.
- c. Develop a building-level support team of Clinical Faculty.

#### 3. <u>Teaching and the Student Teaching Experience</u>

- a. Review and provide feedback on the student teacher's lesson plans prior to their being taught.
- b. Observe the student teacher informally each day and provide oral feedback on both classroom management skills and at least one lesson or activity.
- c. Observe the student teacher formally once a week except for the first and last week of their placement. Review and discuss the student teacher's lesson plan in relation to overall instructional objectives prior to observing the lesson. Provide written feedback, using the Consortium observation form, after the observation.
- d. Serve as a resource person to the student teacher regarding the teaching process, supplies, equipment and curriculum responsibilities.
- e. Work cooperatively with the college/university supervisor to see that the student teacher is meeting college/university goals and expectations.
- f. Work cooperatively with the college/university supervisor to monitor the student teacher's readiness to assume increased classroom teaching responsibilities and to provide those additional opportunities as appropriate.
- g. Provide increasing feedback and support as the student teacher assumes full responsibility for classroom instruction.
- h. Use co-teaching techniques as outlined in the Co-Teaching Resource Handbook.

#### 4. <u>Reflection, Collaboration, and Communication and the Student Teaching</u> <u>Experience</u>

- a. Keep the student teacher apprised of his/her progress at all times and revise goals and expectations as necessary.
- b. Meet formally with the student teacher at least once a week to discuss his/her progress, review short- and long-term instructional plans, and identify specific objectives to work on the following week. Complete the written Consortium evaluation form with the student teacher during this conference.
- c. Keep the college/university supervisor and the building principal informed of the student teacher's progress on a regular basis.
- d. Complete written mid-point and final student teacher evaluations in cooperation with the college/university supervisor.

e. Provide the student teacher with opportunities for professional growth by encouraging observations of other educators, attending professional meetings, and participating in the entire school's program.

#### **Qualifications of Clinical Faculty**

- 1. A valid Virginia Collegiate Professional License with proper endorsement for the teaching assignment.
- 2. Three (3) years (minimum) experience as a successful classroom teacher.
- Advanced work in education. (Commitment to life-long learning as evidenced by work towards a master's degree, workshops, college credits, or other types of activities that assist the teacher in increasing his or her knowledge and performance related to the teaching profession.)
- 4. Recognized expertise in subject matter knowledge and current and varied instructional strategies for the classroom.
- 5. Demonstrated effectiveness in the classroom, as indicated by a proficient or exemplary evaluation rating.
- 6. Skill in effective classroom management techniques
- 7. Knowledge of school/community relations
- 8. Strong oral and written communication skills.
- 9. Strong organizational skills.
- 10. Excellent human relations skills.
- 11. Experience in working with adults and/or student teachers.
- 12. A desire, willingness, and ability to work cooperatively with colleagues and student teachers.
- 13. Willingness to assume a three-year term as a Clinical Faculty, with regular review by the cooperating school divisions and the MidValley Mentorship and Clinical Experience Team.
- 13. Willingness to accept one student teacher per year and to attend one or more "refresher" workshops during his/her three-year term.

#### Appendix H: SAMPLE Three-Year Appointment Letter



Mary Baldwin University Harrisonburg City Schools Rockingham County Schools Staunton City Schools

July 1, 2019

Dear :

The MidValley Consortium (MVC) for Teacher Education is pleased to provide official confirmation of your three-year appointment as a clinical faculty member, effective July 1, 2019 through June 30, 2022, We appreciate the commitment that you made to complete clinical faculty training this year and look forward to working with you over the next three years!

As you know, you may be asked to mentor one student teacher each year (depending upon specific college or university need, geographic location, etc.). We will also provide four after-school "refresher workshops" each year and request that you plan to attend at least one of these sessions during your three-year appointment. Finally, we will provide you with an increased stipend/honorarium of \$30/week for supervising our student teachers.

Near the end of your three-year appointment, you will be given an opportunity to express your interest in continuing as part of the clinical faculty program. Reappointment will be based on your expression of interest, your attendance at a refresher workshop, continued recommendation from your school division, and review by the MVC Mentorship and Clinical Experience Team (MCET).

Thank you again for your willingness to continue mentoring new teachers into your profession. As so many of you have said during this year's training, supervising student teachers is also an exciting professional growth opportunity for clinical faculty. Please do not hesitate to contact any of the MCET members listed below if you have any questions about the clinical faculty program.

Augusta County Schools Bridgewater College Eastern Mennonite University Harrisonburg City Schools James Madison University Mary Baldwin University Page County Schools Rockingham County Schools Shenandoah County Schools Staunton City Schools Waynesboro City Schools

Jessica Wilkerson Beth Lehman Ron Shultz Ann Conners Dara Hall Lori Wall Cathy Marston Larry Shifflett Jen Jones Amy Bradley Alison Cornish

jwcolvin@augusta.k12.va.us blehman@bridgewater.edu ronald.shultz@emu.edu aconners@harrisonburg.k12.va.us halldm@jmu.edu lwall@marybaldwin.edu cmarston@pagecounty.k12.va.us lfshifflett@rockingham.k12.va.us jlhaas@shenandoah.k12.va.us abradley@staunton.k12.va.us acornish@waynesboro.k12.va.us

Sincerely,

Dara Hall On behalf of the MVC MCET NOTE: Be sure to check out our website for helpful information about the MVC and the clinical faculty program! http://www.imu.edu/coe/esc/consortium.shtml

#### Appendix I: SAMPLE Three-Year Reappointment Letter



July 1, 2019

Dear:

The MidValley Consortium (MVC) for Teacher Education is pleased to provide official confirmation of your three-year reappointment as a clinical faculty member, effective July 1, 2019 through June 30, 2022. We appreciate the commitment that you have made in the past to mentor our student teachers and to attend clinical faculty refresher workshops, and we look forward to working with you for another three years!

As in the past, you may be asked to mentor one student teacher each year (depending upon specific college or university need, geographic location, etc.). We will also provide "refresher workshops" each year and request that you plan to attend at least one of these sessions during your new three-year appointment. Finally, we will continue to provide you with a stipend/honorarium of \$30/week for supervising our student teachers.

Near the end of your three-year reappointment, you will be given an opportunity to express your interest in continuing as part of the clinical faculty program.

Reappointment will be based on your expression of interest, your attendance at a refresher workshop, continued recommendation from your school division, and review by the MVC Mentorship and Clinical Experience Team (MCET).

Thank you again for your willingness to continue mentoring new teachers into your profession. Please do not hesitate to contact any of the MCET members listed below if you have any questions about the clinical faculty program.

Augusta County Schools Bridgewater College Eastern Mennonite University Harrisonburg City Schools James Madison University Mary Baldwin University Page County Schools Rockingham County Schools Shenandoah County Schools Staunton City Schools Jessica Wilkerson Beth Lehman Ron Shultz Ann Conners Dara Hall Lori Wall Cathy Marston Larry Shifflett Jen Jones Amy Bradley Alison Cornish jwcolvin@augusta.k12.va.us blehman@bridgewater.edu ronald.shultz@emu.edu aconners@harrisonburg.k12.va.us halldm@jmu.edu lwall@marybaldwin.edu cmarston@pagecounty.k12.va.us lfshifflett@rockingham.k12.va.us jlhaas@shenandoah.k12.va.us abradley@staunton.k12.va.us acornish@waynesboro.k12.va.us

Sincerely,

Dara Hall On behalf of the MVC MCET <u>NOTE</u>: Be sure to check out our website for helpful information about the MVC and the clinical faculty program! <u>http://www.imu.edu/coe/esc/consortium.shtml</u>

#### Appendix J: SAMPLE Non-Reappointment Letter



Eastern Mennonite University Mary Baldwin University Harrisonburg City Schools Rockingham County Schools Staunton City Schools

July 1, 2019

#### Dear :

The MidValley Consortium (MVC) for Teacher Education wishes to thank you for your professional commitment to mentor student teachers through our clinical faculty program over the last three years. Our records indicate that you were appointed to a term that began on July 1, 2019 and ended on June 30, 2022. A number of clinical faculty in this group have since retired, moved out of the area, assumed administrative positions, or, for a variety of reasons, have not met the requirement to attend at least one refresher workshop during the last three years. You appear to be in this category and therefore are not eligible for re-appointment.

You may retroactively renew your appointment by attending a refresher workshop in the fall. If you wish to continue your appointment for a new three-year term, please check back in September at the calendar on the website below for dates and location of refresher workshops. You will no longer receive reminder emails for the refresher workshops. If you have any questions about renewing your appointment, please contact Dara Hall in the Education Support Center halldm@imu.edu or at 540-568- 2996.

PLEASE NOTE: If our records are not correct, contact Dara Hall or one of the members of the MVC Mentorship and Clinical Experience Team (MCET) listed below as soon as possible. Again, we thank you for your valued service, and hope that you are still interested in working with our student teachers as a regular cooperating teacher when opportunities arise.

Augusta County Schools Bridgewater College Eastern Mennonite University Harrisonburg City Schools James Madison University Mary Baldwin University Page County Schools **Rockingham County Schools** Shenandoah County Schools Staunton Citv Schools Waynesboro City Schools

Jessica Wilkerson Beth Lehman Ron Shultz Ann Conners Dara Hall Lori Wall Cathy Marston Larry Shifflett Jen Jones Amv Bradlev Alison Cornish

jwcolvin@augusta.k12.va.us blehman@bridgewater.edu ronald.shultz@emu.edu aconners@harrisonburg.k12.va.us halldm@jmu.edu lwall@marybaldwin.edu cmarston@pagecounty.k12.va.us lfshifflett@rockingham.k12.va.us jlhaas@shenandoah.k12.va.us abradlev@staunton.k12.va.us acornish@waynesboro.k12.va.us

Sincerely,

Dara Hall On behalf of the MVC MCET

NOTE: Be sure to check out our website for helpful information about the MVC and the clinical faculty program! http://www.imu.edu/coe/esc/consortium.shtml

# Appendix K: MidValley Consortium for Teacher Education Clinical Faculty Training

Session One \_\_\_\_ Fall \_\_\_\_ Spring 20\_\_\_\_

School Division \_\_\_\_\_\_ High School \_\_ Middle School \_\_ Elementary \_\_\_ Other \_\_\_\_\_

Please help us evaluate the first day of your Clinical Faculty training by giving us your comments and suggestions.

High

Low	Ŭ				
	5	4	3	2	1
1. Process (activities, variety, pacing, etc.)					
Comments:					
<b>2. Morning Session</b> : Characteristics of Student Teachers & Adult Learners; Framework for Mentoring; Professional Knowledge, Assessing Student Learning and Planning					
Comments:					
<ol> <li>Afternoon Session: Using Assessment for Instructional Planning &amp; Co-planning; Conducting Pre- observation Conferences; Co-Teaching Techniques, Learning Environment, &amp; Instructional Delivery; Observation Strategies</li> </ol>					
Comments:					

# 4. The most valuable part of today's training for me was:

5. I wish that the following topics had been covered:

#### MidValley Consortium for Teacher Education Clinical Faculty Training

	Session Two Fall Spring 20
School Division	High School Middle School
	Elementary Other

Please help us evaluate the second day of your Clinical Faculty training by giving us your comments and suggestions.

Н	High			L	_OW
	5	4	3	2	1
1. Process (activities, variety, pacing, etc.)					
Comments:					
2. Morning Session: Welcoming Your Student Teacher; College/University Expectations; Coaching; Giving Feedback; Observation Techniques; Impact on Student Learning; Conducting Post-Observation Conferences					
Comments:					
<b>3. Afternoon Session</b> : Framework for Effective Mentoring; Professionalism; Problem-Solving for Student Teacher Growth; Writing Recommendations; Differentiating Cooperating Teachers and Clinical Faculty; Paperwork					
Comments:					

### 4. Suggestions for future refresher workshops:

#### MidValley Consortium for Teacher Education Clinical Faculty Training – Reflection and Goal Setting

#### Session Two

School Division \_\_\_\_\_ High School \_\_ Middle School

Date: \_\_\_\_\_ Elementary \_\_ Other \_\_\_\_\_

#### Reflect on the two days of clinical faculty training you have just completed.

Three important ideas I learned during the two days of training:

Two things that facilitated my learning:

One thing I plan to do with this new information:

The following resources or support would help me to be an effective clinical faculty/mentor:

As a clinical faculty/mentor, I would personally like to accomplish the following by the end of the next school year:

#### Appendix L: MidValley Mentor Program Application for Clinical Faculty Mentor Appointment

#### (Please return this application directly to your building principal <u>by the date</u> <u>determined by your school division</u> — do <u>not</u> mail it directly to the MidValley Consortium)

#### PART A. TO BE COMPLETED BY TEACHER

Name	Preferre	d name	
Date	Last 4 digits SSN	E-mail	
School Division		School	
Home Address			

# Please read the attached description of Clinical Faculty Mentor responsibilities and qualifications and then complete the following:

\_\_\_\_\_ I am Clinical Faculty in good standing. I meet the qualifications listed below. I understand that:

initial

I must attend the equivalent of a two-day training session, which may be scheduled in differing formats (all-day with substitute, half-day during teacher workday, after-school, etc.), depending on school division or college/university calendars.

Current teaching assignment [grade/subject area(s)]

Under continuing contract in division: teaching assignment Total number of years teaching	YesNo Number of years in current Licensure area(s)
Type of license held	Highest degree earned
Please indicate the name of the institution Undergraduate Institution	c ,

Graduate Institution\_\_\_\_\_

Licensure Institution (if different than above)\_\_\_\_\_

List the major professional growth and in-service activities in which you have been involved during the last year:

What recent experience do you have working as a mentor teacher?

Name \_\_\_\_\_

Signature	

#### PART B. TO BE COMPLETED BY PRINCIPAL

Yes	No Does this teacher show a willingness and ability to work cooperatively with colleagues?
Yes	No Has this teacher demonstrated a desire to mentor colleagues?
Yes	No Does this teacher communicate effectively using strong oral and written skills?
Yes	No Does this teacher have excellent human relations skills?
Yes	No Does this teacher have strong organizational skills?
Yes	No Does this teacher have knowledge of school/community resources?
Yes	No Does this teacher have skill in reflective practice?
Yes	No Has this teacher demonstrated a willingness to tackle challenges?
Yes	I recommend this teacher for the MidValley Mentor program.
No	I do not recommend this teacher for the MidValley Mentor program.
Commontor	

Comments:

Name \_\_\_\_\_

Signature \_\_\_\_\_

#### PART C. TO BE COMPLETED BY CENTRAL OFFICE PERSONNEL

Yes I recommend this teacher for the MidValley Mentor program. I do not recommend this teacher for the MidValley Mentor program.

Comments:

Name \_\_\_\_\_

Signature \_\_\_\_\_

#### PART D. TO BE COMPLETED BY MIDVALLEY MENTORSHIP AND CLINICAL EXPERIENCE TEAM

Yes We recommend this teacher for the MidValley Mentor program. We do not recommend this teacher for the MidValley Mentor program.

Comments:

Notification sent\_\_\_\_\_ Date of Appoin

Date of Appointment\_\_\_\_\_

#### **Qualifications of Mentor**

- 1. Current, active Clinical Faculty.
- 2. Advanced work in education. (Commitment to life-long learning as evidenced by work towards a master's degree, workshops, college credits, or other types of activities that assist the teacher in increasing his or her knowledge and performance related to the teaching profession.)
- 3. Recognized expertise in subject matter knowledge and current and varied instructional strategies for the classroom.
- 4. Skill in effective classroom management techniques.

- 5. Knowledge of school/community relations.
- 6. Strong oral and written communication skills.
- 7. Strong organizational skills.
- 8. Excellent human relations skills.
- 9. Experience in working with adults and/or student teachers.
- 10. A desire, willingness, and ability to work cooperatively with colleagues and student teachers.
- 11. **Willingness to accept one mentee and/or student teacher per year.** The consortium does not expect a CF to work with both a mentee and ST unless desired by the mentor and their administration.
- 12. Willingness to maintain clinical faculty status by attending one or more "refresher" workshops during his/her three-year term.

#### Appendix M: MidValley Consortium for Teacher Education Clinical Faculty Mentor Workshop

Session One

School Division \_\_\_\_\_ High School \_\_ Middle School \_\_ Elementary \_\_ Other \_\_\_\_\_

Please help us evaluate the first day of your Clinical Faculty training by giving us your comments and suggestions.

	High			Low	
	5	4	3	2	1
1. Process (activities, variety, pacing, etc.)					
Comments:					
<b>2. Morning Session</b> : Clinical Faculty Member Defined,					
The New Teacher Experience, Mentoring Relationships					
Comments:					
3. Afternoon Session: Mentoring Relationships,					
Mentoring Conversations, Feedback					
Comments:					

4. The most valuable part of today's training for me was:

5. I wish that the following topics had been covered:

#### MidValley Consortium for Teacher Education Clinical Faculty Mentor Workshop

#### Session Two

School Division \_\_\_\_\_ High School \_\_ Middle School \_\_ Elementary \_\_ Other \_\_\_\_\_

Please help us evaluate the second day of your Clinical Faculty training by giving us your comments and suggestions.

	High				Low
	5	4	3	2	1
<b>1. Process</b> (activities, variety, pacing, etc.)					
Comments:					
<b>2. Morning Session</b> : Instructional Coaching, Data Analysis, and Video Observation					
Comments:					
3. Afternoon Session: Video Coaching, Sustaining the					
Mentor – Mentee Relationship, Clinical Faculty Mentor					
Re-Defined, Electronic Community of Practice – E- Mentoring Network					
Comments:					

- 4. The most valuable part of today's training for me was:
- 5. Suggestions for future refresher workshops:

#### MidValley Consortium for Teacher Education MidValley Mentor Workshop Reflection and Goal Setting

Name	Division
Date	School

#### Reflect on the two days of the mentor workshop you have just completed.

- 1. Three important ideas I learned during the two days:
- 2. Two things that facilitated my learning:
- 3. One thing I plan to do with this new information:
- 4. The following resources or support would help me to be an effective mentor:

5. As a clinical faculty mentor, I would personally like to accomplish the following by the end of the next school year:

6. These are the questions that I have for my administrator in order to become an effective mentor:

# Appendix N: Clinical Faculty Refresher Workshop Summary

Year	Refresher Topic
2023-2024	Engaging in Meaningful Feedback
2022-2023	The Critical Role Clinical Faculty Play in Sustaining the Profession
2021-2022	Culturally Competent Mentorship
2020-2021	VIRTUAL: Navigating, interrupting, and responding to
	macroaggressions, bias, and injustices in P-12 schools
2019-2020	Navigating, interrupting, and responding to macroaggressions, bias, and injustices in P-12 schools
2018-2019	Building Relationships & Engaging Student Teachers in Your Classroom Community
2017-2018	Social-Emotional Learning: modeling relationship building for our student teachers
2016-2017	Out With the Old, In With the New
2015-2016	Assessing Your Student Teacher
2014-2015	Communication with Your Student Teacher
2013-2014	Reality Check: Co-Teaching and Collaboration with your Student Teacher
2012-2013	The Impact of Student Learning and Assessment on Student Teaching
2011-2012	Giving Meaningful Feedback – Written and oral communication with student teachers
2010-2011	Balance Between No Support and No Freedom – Transition and Co- Teaching models
2009-2010	Using Technology
2008-2009	What to Share With ST about SOL testing; Using Observation/Assessment Instruments
2007-2008	Qualities of Good Clinical Faculty; Split Loyalty Between CT and ST, Classroom Management
2006-2007	Authentic Assessment; Content Specific Reference Guides
2005-2006	Successful Strategies With Student Teachers in 5 New categories: Knowledge of Content, Preparation for Instruction, Instructional Performance, Reflection and Evaluation-Impact on Student Learning, Professionalism
2004-2005	Well, Did Your Kids Learn Anything?
2003-2004	Student Teachers, Content Knowledge, and Student Learning
2002-2003	Show Me that My Students Are Learning When I have a Student Teacher
2001-2002	I'm Clinical Faculty but I Don't Have a Student Teacher Now What do I do?
2000-2001	The 3 Ds: Dynamic Duos and Dispositions
1997-2000	Clinical Faculty Refresher - untitled

## Appendix O: Observation Form



#### FORMATIVE OBSERVATION OF STUDENT TEACHING PROFILE OF STUDENT TEACHING PERFORMANCE

	5		
Stu	Ident Teacher:	School:	Date:
Co	operating Teacher:	Time/Class/Period:	
То	pics/Strategies:		
Ch	eck the box to the left if the standar	rd is observed.	
	A. Professional Knowledge   The s	student teacher	Observation Focus:

<ol> <li>Demonstrates an understanding of appropriate content standards (sol/professional standards).</li> </ol>	
A2. Demonstrates essential knowledge and skills of subject area.	
A3. Demonstrates the link between the content and students' past and future learning experiences as well as related subject areas.	
A4. Culturally Responsive Practice: Demonstrates an understanding that discipline content is evolving, appreciates multiple perspectives and recognizes the potential for bias.	
B. Assessment of and for Student Learning   The student teacher	Observation Data/ Notes
B1. Sets acceptable, measurable, and appropriate learning outcomes and achievement goals for student learning.	
B2. Uses formal and informal assessment of learning outcomes.	
B3. Checks for understanding to enhance student learning.	
B4. Systemically gathers, analyzes, and uses multiple data sources by student groups and individuals to understand student learning.	
B5. Culturally Responsive Practice: Adapts assessment to accommodate a variety of student needs and experiences (with attention to English Language Learners, students with exceptionalities, cultural awareness).	
students with exception arries, cultural awareness).	
C. Instructional Planning   The student teacher	
<ol> <li>Is familiar with and uses relevant aspects of students' background, knowledge, experience, and skills.</li> </ol>	
C2. Culturally Responsive Practice: Selects classroom resources that reflect cultural inclusivity and plans for differentiated instruction to address the unique characteristics of individual students (e.g., TAG/GT, ELL, special needs, gender, race, ethnicity).	
C3. Plans appropriate instructional strategies to meet the learning outcomes.	
C4. Integrates instructional technology in planning.	
C5. Integrates essential content in planning.	
C8. Plans time realistically for pacing and transitions for content mastery.	
D. Learning Environment   The student teacher	
D1. Establishes a safe physical and psychological environment for all students.	
D2. Establishes a climate of trust and teamwork.	
D3. Maintains consistent standards for positive classroom behavior.	
D4. Culturally Responsive Practice: Demonstrates respect for and responsiveness to the cultural backgrounds and differing perspectives of learners.	

E. Instructional Delivery   The student teacher	Observation Data/ Notes
E1. Presents procedures and outcomes clearly to students and checks for student understanding.	
E2. Presents content accurately and effectively.	
E3. Engages and maintains students in active learning.	
E4. Engages learners in a range of learning experiences using technology.	
E5. Facilitates students' use of higher level thinking skills in instruction.	
E0. Differentiates instruction and provides appropriate accommodations to meet the needs of diverse learners.	
E7. Uses instructional and transition time for content mastery.	
E8. Culturally Responsive Practice: Teaches and models the skills to communicate and engage with diverse groups (based on race, ethnicity, gender, identity, ability, and/or socioeconomic status).	
F. Reflection For Student Academic Progress   The student teacher	
F1. Takes responsibility for student learning by using ongoing analysis and reflection.	
F2. Culturally Responsive Practice: Provides specific evidence to document student learning.	
F3. Seeks and uses information from professional sources (e.g., cooperating teacher, colleagues, and/or research) to improve instruction.	
G. Professionalism   The student teacher	
G1. Demonstrates the expectations of the profession including codes of ethics, professional standards of practice and relevant law and policy.	
G2. Takes initiative to grow and develop through interactions that enhance practice support student learning.	
G3. Communicates effectively through oral and written language with all stakeholders.	
G4. Culturally Responsive Practice: Uses inclusive communication strategies (e.g. gender, race, ethnicity, ELL, and ability)	
G5. Builds relationships and collaborates with families, communities, colleagues, and other professionals to promote learner growth and development.	
G6. Culturally Responsive Practice: Accesses resources to deepen an understanding of cultural, racial, ethnic, gender and learning differences to build stronger relationships and create more relevant learning experiences.	

Areas of Strength: Areas for Growth/Goals:

Student Teacher

Date

University Supervisor or Cooperating Teacher

Date

## Appendix P Student Teaching Assessment



#### ASSESSMENT OF STUDENT TEACHING PROFILE OF STUDENT TEACHING PERFORMANCE

College of Education

The cooperating teacher and university supervisor should each complete this form provide copies for each other, and give the originals to the student teacher/inte			eaching/internship,
This evaluation cannot be shared with anyone outside of the university without the	he written co	nsent of the student teacher.	
Student Teacher/Intern:		Cooperating Teacher:	
School:	School Di	vision:	Grade/Subject:
Year: Please check one: Block:1234	Extend	ed Block Fall Extended Blo	ck Spring
Mid-term BlockMay	Summer		
Please check one:Mid-block Evaluation Final Evaluation Please of	check one: _	_ Cooperating Teacher Un	iversity Supervisor

#### A. PROFESSIONAL KNOWLEDGE The student teacher...

	DFESSIONAL KNOWLEDGE The student teacher Pression Meet Expectations, DE=Developing Towards Expectations, ME=Meets Expectations (TARGET), EE=Exceeds Expectations
√.	A1. DEMONSTRATES AN UNDERSTANDING OF APPROPRIATE CONTENT STANDARDS (SOL/PROFESSIONAL STANDARDS). InTASC 4n
DN	inaccurately and inconsistently references the appropriate content standards.
DE	references appropriate content standards in daily plans;
ME	AND explicitly references and clearly aligns appropriate content standards with planned activities and assessments;
EE	AND clearly demonstrates and explains the appropriate sequencing of the content standards.
	A2. DEMONSTRATES ESSENTIAL KNOWLEDGE AND SKILLS OF SUBJECT AREA. InTASC 4a, 4l, 7g
DN	inaccurately presents key subject matter ideas and skills.
DE	demonstrates accurate knowledge and skills of subject area;
ME	ANDuses representation and/or an explanation that captures key subject matter ideas and skills;
EE	ANDuses multiple representations and explanations that capture key subject matter ideas and skills.
	A3. DEMONSTRATES THE LINK BETWEEN THE CONTENT AND STUDENTS' PAST AND FUTURE LEARNING EXPERIENCES AS WELL AS RELATED SUBJECT AREAS. INTASC 4d
DN	references content to NEITHER the students' past and future learning experiences NOR related subject areas.
DE	references content to EITHER the students' past and future learning experiences OR related subject areas.
ME	references content to BOTH the students' past and future learning experiences AND related subject areas;
EE	ANDreferences content to real world experiences and applications.
	A4. Culturally Responsive Practice: DEMONSTRATES AN UNDERSTANDING THAT DISCIPLINE CONTENT IS EVOLVING, APPRECIATES MULTIPLE PERSPECTIVES AND RECOGNIZES THE POTENTIAL FOR BIAS. InTASC 4b, 4o, 4p, 4q
DN	presents content without acknowledgement of alternative disciplinary perspectives.
DE	purposefully presents content that acknowledges alternative disciplinary perspectives;
ME	AND identifies the potential of bias in their representation of the content of the discipline and seeks to address it;
EE	AND facilitates learners' critical analyses of the multiple perspectives in the discipline.
	A. Content Knowledge DISPOSITION: DEMONSTRATES AN UNDERTANDING THAT DISCIPLINE CONTENT IS EVOLVING, APPRECIATES MULTIPLE PERSPECTIVES AND RECOGNIZES THE POTENTIAL FOR BIAS. InTASC 4o, 4p, 4q
DN	presents content without acknowledgement of alternative disciplinary perspectives.
DE	presents content acknowledging alternative disciplinary perspectives;
ME	ANDrecognizes the potential of bias in their representation of the discipline;
EE	ANDfacilitates learners' critical analyses of the multiple perspectives in the discipline.

Comments:

Rev 8/23

DN= D	N= Does Not Meet Expectations, DE=Developing Towards Expectations, ME=Meets Expectations (TARGET), EE=Exceeds Expectations			
<ul><li>✓</li></ul>		B1. SETS ACCEPTABLE, MEASURABLE, AND APPROPRIATE LEARNING OUTCOMES AND ACHIEVEMENT GOALS FOR STUDENT LEARNING. InTASC 6a, 6j, 6k		
DN		sets unacceptable, immeasurable, or inappropriate learning outcomes and achievement goals for student learning.		
DE		sets acceptable and appropriate learning outcomes and achievement goals for student learning;		
ME		ANDsets measurable learning outcomes and achievement goals for student learning AND states these clearly on the lesson plan;		
EE		ANDmatches learning outcomes and achievement goals to classroom assessments.		
	•	B2. USES FORMAL AND INFORMAL ASSESSMENT OF LEARNING OUTCOMES. InTASC 6a, 6j, 6k		
DN		uses inappropriate formal and informal assessments that are not linked to learning outcomes.		
DE		uses appropriate formal and informal assessments that are linked to learning outcomes;		
ME		ANDcan articulate ways formal and informal assessments should impact future learning activities;		
EE		ANDhas strategies to provide students with effective, descriptive feedback to guide their progress.		
		B3. CHECKS FOR UNDERSTANDING TO ENHANCE STUDENT LEARNING. InTASC 6e, 6g, 71		
DN		makes few or no attempts to determine student comprehension AND gives students little or no feedback.		
DE		monitors student comprehension of content AND provides students with limited feedback.		
ME		uses a variety of assessment techniques to monitor comprehension of the content AND provides students with timely meaningful feedback.		
EE		ANDanalyzes individual and group comprehension of the content, AND gives all students substantive and specific feedback.		
		B4. SYSTEMATICALLY GATHERS, ANALYZES, AND USES MULTIPLE DATA SOURCES BY STUDENT GROUPS AND INDIVIDUALS TO UNDERSTAND STUDENT LEARNING. InTASC 6e, 6g, 6h,6k, 6l, 6t, 6u		
DN		unable to articulate effectiveness of teaching based on student learning data.		
DE		able to articulate effectiveness of teaching based on student learning data;		
ME		ANDsystematically gathers, analyzes, and uses relevant data to measure learner- or group-specific trends that can inform instruction;		
EE		ANDuses disaggregated data to plan appropriate, varied methods and activities to meet the learning outcomes with specific attention to students within gap groups.		
		B5. Culturally Responsive Practice: ADAPTS ASSESSMENT TO ACCOMMODATE A VARIETY OF STUDENT NEEDS AND EXPERIENCES (WITH ATTENTION TO ENGLISH LANGUAGE LEARNERS, STUDENTS WITH EXCEPTIONALITIES, CULTURAL AWARENESS). InTASC 6g, 6h, 6i, 6l, 6p, 6u		
DN		does not adapt assessments to accommodate student needs or experiences.		
DE		inconsistently attempts to adapt assessments to accommodate student needs and experiences.		
ME		consistently adapts assessments to accommodate most student needs and experiences.		
EE		thoughtfully anticipates the needs of each student to adapt assessments with a variety of assessment approaches.		
		B. Assessment DISPOSITION: VALUES THE USE OF SELF AND PEER ASSESSMENT AND USES DATA ETHICALLY TO IDENTIFY LEARNER STRENGTHS AND TO PROMOTE LEARNER GROWTH. InTASC 8q, 8v		
DN		uses assessment in a limited fashion in both form and function.		
DE		uses self and/or peer assessment to promote learner growth;		
ME		AND works to develop each learner's ability to identify their own strengths, challenges, and progress;		
EE		ANDengages learners in decisions regarding their own progress with attention to the ethical use of assessments and assessment data.		

2

B. ASSESSMENT OF AND FOR STUDENT LEARNING The student teacher ...

Comments:

#### C. INSTRUCTIONAL PLANNING The student teacher..

	STRUCTIONAL PLANNING The student teacher pes Not Meet Expectations, DE=Developing Towards Expectations, ME=Meets Expectations (TARGET), EE=Exceeds Expectations
1	C1. IS FAMILIAR WITH AND USES RELEVANT ASPECTS OF STUDENTS' BACKGROUND, KNOWLEDGE, EXPERIENCE, AND
•	SKILLS. InTASC 2c, 7j, 7n
DN	is unfamiliar with the background, experiences, and skill level of most students in the class.
DE	is familiar with the relevant aspects of the background, knowledge, experience, and skills of most students in the class;
ME	ANDuses relevant aspects of students' background, knowledge, experience, and skills of most students in the class.
EE	demonstrates detailed understanding of the background, experience, and skill level of ALL students in the class AND plans using what they know about learners including developmental levels, prior learning, and interests.
	C2. Culturally Responsive Practice: SELECTS CLASSROOM RESOURCES THAT REFLECT CULTURAL INCLUSIVITY AND PLAN FOR DIFFERENTIATED INSTRUCTION TO ADDRESS THE UNIQUE CHARACTERISTICS OF INDIVIDUAL STUDENTS (E.G. TAG/GT, ESL, SPECIAL NEEDS, GENDER, RACE, ETHNICITY). InTASC 1b, 2a, 7b
DN	plans undifferentiated instruction.
DE	plans differentiated instruction to address the unique characteristics of some individuals in the class.
ME	effectively plans differentiated instruction and selects classroom resources that are culturally inclusive to address the unique characteristics of most individuals in the class;
EE	ANDseeks resources from instructional specialists to refine plans to meet learner needs.
	C3. PLANS APPROPRIATE INSTRUCTIONAL STRATEGIES TO MEET THE LEARNING OUTCOMES. InTASC 7a, 7b, 7l
DN	plans ineffective methods and activities to meet the learning outcomes.
DE	plans effective methods and activities to meet the learning outcomes;
ME	ANDuses data and plans varied methods and activities to meet the learning outcomes with specific attention to students within gap groups;
EE	ANDuses disaggregated data to plan appropriate, varied methods and activities to meet the learning outcomes with specific attention to students within gap groups.
	C4. INTEGRATES INSTRUCTIONAL TECHNOLOGY IN PLANNING. InTASC 7k, 8r
DN	rarely or ineffectively integrates instructional technology in planning.
DE	sometimes effectively integrates instructional technology in planning;
ME	regularly integrates effective instructional technology in planning to meet learning outcomes;
EE	ANDintegrates a variety of instructional technology in planning, AND clearly identifies alternative plans in the event technology fails.
	C5. INTEGRATES ESSENTIAL CONTENT IN PLANNING. InTASC 7g
DN	integrates only non-essential content in planning.
DE	integrates essential content in some planning.
ME	integrates essential content in all planning;
EE	ANDplanning is expanded to elaborate on identified essential content to enhance student learning.
	C6. PLANS TIME REALISTICALLY FOR PACING AND TRANSITIONS FOR CONTENT MASTERY. InTASC 7
DN	plans time unrealistically for pacing and transitions.
DE	plans time realistically for pacing; however, transition time is not apparent.
ME	plans time realistically for pacing AND transitions.
EE	plans include realistic pacing allowing for content mastery AND meaningful transitions that promote student learning.
	C. Planning for Instruction DISPOSITION: PLANNING ASSURES STUDENT LEARNING AND IS OPEN TO ADJUSTMENT AND REVISION BASED ON CHANGING NEEDS AND CIRCUMSTANCES. InTASC 7p, 7q
DN	plans instruction based primarily on teacher manuals and/or other prepared materials.
DE	plans instruction using knowledge of students' strengths, needs and backgrounds;
ME	ANDuses daily and unit plans to ensure student learning in collaboration with other colleagues;
EE	AND anticipates learner needs AND makes adjustments based on effectiveness of instruction and changing student and community needs.

Comments:

D. LEARNING ENVIRONMENT The student teacher ...

1	1	D1. ESTABLISHES A SAFE PHYSICAL AND PSYCHOLOGICAL ENVIRONMENT FOR ALL STUDENTS. InTASC 3a, 3k
DN		maintains an unsafe physical and psychological environment.
DE		attempts to maintain a safe physical and psychological environment.
ME		effectively creates a safe physical and psychological environment;
EE		AND explains the purpose for these choices to all students.
		D2. ESTABLISHES A CLIMATE OF TRUST AND TEAMWORK. InTASC 3j, 3q
DN		ignores evidence that a climate of trust and teamwork is lacking.
DE		by being enthusiastic, fair, caring, and respectful to all students;
ME		AND purposefully creates a climate of trust and teamwork, anchored in affirmation, mutual respect and validation, utilizing culturally responsive practices;
EE		ANDfosters regular student collaboration and models high expectations for all students.
		D3. MAINTAINS CONSISTENT STANDARDS FOR POSITIVE CLASSROOM BEHAVIOR. InTASC 30
DN		ignores students' needs and behavior.
DE		attempts to maintain positive classroom behavior.
ME		responds effectively and consistently to students' needs and behavior AND can explain why the model they are using for positive classroom behavior is effective.
EE		demonstrates the ability to change and adapt classroom management plans based on students' changing needs and behavior AND explain why changes were made.
		D4. Culturally Responsive Practice: DEMONSTRATES RESPECT FOR AND RESPONSIVENESS TO THE CULTURAL BACKGROUNDS AND DIFFERING PERSPECTIVES OF LEARNERS. InTASC 3f, 3I
DN		infrequently shows awareness of the different cultural backgrounds and differing perspectives of learners in the classroom.
DE		can identify the different cultural backgrounds AND acknowledge cultural and social diversity in all aspects of the learning process, including for gender, race, ethnicity, English Language Learners, and students with exceptionalities;
ME		AND values and fosters classroom environments that create opportunities for access and achievement for the varying cultural backgrounds and differing perspectives of learners in the classroom;
EE		AND incorporates, advocates, and affirms these differences into their teaching and use of content examples.
		D. Learning Environment DISPOSITION: PROMOTES INCLUSIVE LEARNING ENVIRONMENTS THAT ENABLE EACH LEARNER TO MEET HIGH STANDARDS BY VALUING DIFFERING BACKGROUNDS AND ABILITIES. InTASC 21, 2m, 2n, 2o, 3p
DN		shows a minimal understanding of individual differences.
DE		uses learners' differing abilities, skills, cultures, and communities to promote an inclusive learning environment;
ME		ANDprovides opportunities for learners to participate in decision-making, to engage in exploration, and to work collaboratively and independently;
EE		ANDactively works to ensure that each learner feels valued AND helps students to learn to value one another.

Comments:

#### E. INSTRUCTIONAL DELIVERY The student teacher ...

E. INSTRUCTIONAL DELIVERY The student teacher DN= Does Not Meet Expectations, DE=Developing Towards Expectations, ME=Meets Expectations (TARGET), EE=Exceeds Expectations			
✓		E1. PRESENTS PROCEDURES AND OUTCOMES CLEARLY TO STUDENTS AND CHECKS FOR STUDENT UNDERSTANDING. InTASC 8j	
DN		presents unclear OR inaccurate information about the learning objectives or the procedures for instructional activities.	
DE		provides students with clear, accurate information about the learning objectives and procedures for instructional activities;	
ME		ANDensures that all students understand the learning objectives AND can carry out those procedures;	
EE		ANDconsistently presents clear procedures and outcomes, AND effectively checks for student understanding.	

Rev 8/23

	E2. PRESENTS CONTENT ACCURATELY AND EFFECTIVELY. InTASC 4a, 4l, 8a, 8h
DN	uses ineffective strategies when presenting content to students.
DE	uses effective strategies to present content to students;
ME	ANDmakes content relevant to students' prior experiences;
EE	ANDcontinually presents material clearly and explicitly with well-chosen examples.
	E3. ENGAGES AND MAINTAINS STUDENTS IN ACTIVE LEARNING. InTASC 4b, 4c, 8f, 8g
DN	keeps students passively involved in learning, relying heavily on lectures, textbooks and worksheets.
DE	attempts to keep students actively involved, but some students are disengaged.
ME	keeps students actively involved by adapting instruction in the moment, based on student learning needs;
EE	ANDkeeps all students challenged and highly engaged as active learners and problem solvers.
	E4. ENGAGES LEARNERS IN A RANGE OF LEARNING EXPERIENCES USING TECHNOLOGY. InTASC 5I, 8g, 8n
DN	rarely uses technology to support student learning.
DE	provides students with guided practice in using technology to support student learning;
ME	ANDengages students in learning experiences with technology that is appropriate and challenging;
EE	ANDcultivates student collaboration and initiative in the use of appropriate technology to support student learning.
	E5. FACILITATES STUDENTS' USE OF HIGHER LEVEL THINKING SKILLS IN INSTRUCTION. InTASC 8F
DN	instruction includes only lower level thinking skills (e.g. using only low level questions).
DE	instruction incorporates higher level thinking skills (e.g. problem solving, critical thinking, and analysis), but students still require instruction to apply these techniques.
ME	prepares students to apply existing knowledge in new areas through higher order thinking skills in instructional activities;
EE	ANDassesses their growth and development in use of higher level thinking skills.
	E6. DIFFERENTIATES INSTRUCTION AND PROVIDES APPROPRIATE ACCOMMODATIONS TO MEET THE NEEDS OF DIVERSE LEARNERS. InTASC 2a, 2b, 8h, 8p
DN	provides undifferentiated instruction for students.
DE	attempts to accommodate student learning needs but with mixed success.
ME	differentiates and scaffolds instruction to accommodate most students' learning needs.
EE	successfully reaches all students by skillfully differentiating and scaffolding, using activities appropriate for a range of learners.
	E7. USES INSTRUCTIONAL AND TRANSITION TIME FOR CONTENT MASTERY. InTASC 4r, 8b
DN	uses instructional time inappropriately and/or on activities of little instructional value.
DE	inconsistently uses instructional and transition time effectively.
ME	consistently uses instructional and transition time effectively for content mastery;
EE	ANDperforms non-instructional procedures efficiently.
	E8. Culturally Responsive Practice: TEACHES AND MODELS THE SKILLS TO COMMUNICATE AND ENGAGE WITH DIVERSE GROUPS (based on race, ethnicity, gender, identity, ability, and/or socioeconomic status). InTASC 3f, 3l, 4m, 8k, 8p
DN	communicates and engages in ways that are not responsive or respectful to diverse groups.
DE	models the skills to communicate and engage with diverse groups in a responsive and respectful manner;
ME	AND intentionally teaches students how to communicate and engage with diverse groups;
EE	ANDensure equitable engagement with peers in ways that support the eradication of discrimination and bias while mitigating classroom power imbalances.

E. Instructional Strategies DISPOSITION: USES MULTIPLE STRATEGIES TO ENGAGE ALL LEARNERS IN A DEEP UNDERSTANDING OF CONTENT AREAS AND MAKE CONNECTIONS, BUILDING STUDENTS' SKILLS TO APPLY KNOWLEDGE IN MEANINGFUL WAYS. INTASC 8p, 8q, 8s
uses ineffective strategies when presenting content to students.
adjusts instruction to use multiple effective strategies to present content to students;
ANDencourages students to use multiple forms of communication to demonstrate their developing knowledge and skills;
ANDadapts instruction in real-time in response to diverse learner ideas and needs.

Comments:

# F. REFLECTION FOR STUDENT ACADEMIC PROGRESS The student teacher ...

DN= D	ON= Does Not Meet Expectations, DE=Developing Towards Expectations, ME=Meets Expectations (TARGET), EE=Exceeds Expectations			
<ul><li>✓</li></ul>		F1. TAKES RESPONSIBILITY FOR STUDENT LEARNING BY USING ONGOING ANALYSIS AND REFLECTION. InTASC 6c, 6l, 9c, 9g, 9l		
DN		puts the responsibility of learning on the student.		
DE		acknowledges responsibility for student learning.		
ME		takes responsibility for student learning by consistently making changes to plans and practice as a result of analysis and reflection;		
EE		ANDsets and implements professional goals to improve student learning.		
		F2. Culturally Responsive Practice: PROVIDES SPECIFIC EVIDENCE TO DOCUMENT STUDENT LEARNING. InTASC 6a, 6g, 6o, 6t, 9c, 9h		
DN		provides unclear evidence to document student learning.		
DE		collects and reviews assessment, engagement, behavioral, and attendance data to document student learning;		
ME		AND disaggregates, analyzes and interprets the data to document student learning over time with specific attention to those within gap groups;		
EE		AND applies differentiated strategies using a variety of assessment data to document student learning and develop interim learning goals.		
		F3. SEEKS AND USES INFORMATION FROM PROFESSIONAL SOURCES (E.G. COOPERATING TEACHER, COLLEAGUES, AND/OR RESEARCH) TO IMPROVE INSTRUCTION. InTASC 9d, 10e, 10r		
DN		relies solely on own knowledge to improve instruction.		
DE		seeks information from the cooperating teacher AND attempts to use it to improve instruction.		
ME		seeks information from professional resources AND uses it to improve instruction.		
EE		seeks information from varied professional resources AND uses it effectively to improve instruction.		
		F. Learner Development DISPOSITION: RESPECTS AND USES LEARNER STRENGTHS TO PROMOTE LEARNER DEVELOPMENT ACROSS COGNITIVE, LINGUISTIC, SOCIAL, EMOTIONAL, AND PHYSICAL DIFFERENCES. InTASC 1h, 1i, 1j, 1k		
DN		shows minimal awareness of learners' differing developmental needs.		
DE		recognizes learners' differing strengths and needs;		
ME		ANDactively promotes learner growth by designing and implementing developmentally appropriate learning experiences;		
EE		ANDincorporates contributions from families, colleagues, and other professional to understand and support each learner's development.		

Comments:

#### G. PROFESSIONALISM The student teacher ...

DN= D	DN= Does Not Meet Expectations, DE=Developing Towards Expectations, ME=Meets Expectations (TARGET), EE=Exceeds Expectations			
<b>√</b>		G1. DEMONSTRATES THE EXPECTATIONS OF THE PROFESSION INCLUDING CODES OF ETHICS, PROFESSIONAL STANDARDS OF PRACTICE AND RELEVANT LAW AND POLICY. InTASC 9j, 90		
DN		acts in an ethically questionable manner and does not follow federal and state laws and school policies.		
DE		inconsistently adheres to ethical codes of conduct and professional standards (attendance, dress, meets deadlines, confidentiality, etc.).		
ME		consistently adheres to ethical codes of conduct and professional standards (attendance, dress, meets deadlines, confidentiality, etc.);		
EE		ANDintentionally adheres to and can articulate federal and state laws, school policies and ethical guidelines.		

Rev 8/23

	G2. TAKES INITIATIVE TO GROW AND DEVELOP THROUGH INTERACTIONS THAT ENHANCE PRACTICE AND SUPPORT
	STUDENT LEARNING. InTASC 9a, 9b, 9d, 9n, 10r
DN	infrequently participates in school-based learning experiences.
DE	takes ownership of professional growth by participating in school-based professional learning experiences;
ME	ANDpractices the new strategies learned to support student learning;
EE	ANDactively seeks and engages in ongoing professional learning opportunities in order to meet professional goals in support of student learning.
	G3. COMMUNICATES EFFECTIVELY THROUGH ORAL AND WRITTEN LANGUAGE WITH ALL STAKEHOLDERS. InTASC 3I, 8h, 10n
DN	frequently makes errors in grammar, usage, and spelling in professional contexts and does not access interpretation and translation services when appropriate.
DE	periodically makes errors in grammar, usage, and spelling in professional contexts.
ME	speaks and writes professionally and effectively in different environments AND accesses interpretation and translation services as appropriate;
EE	ANDuses multiple methods for communication, including appropriate technology.
	G4. Culturally Responsive Practice: USES INCLUSIVE COMMUNICATION STRATEGIES (E.G. FOR GENDER, RACE, ETHNICITY, ENGLISH LANGUAGE LEARNERS, AND ABILITY). InTASC 20, 9e, 10g, 10q
DN	uses biased language, commits microaggressions, and/or makes no attempt to incorporate or consult colleagues for developing communication strategies to support all stakeholders' needs.
DE	consults with colleagues and specialists about stakeholder communication needs;
ME	AND integrates inclusive communication strategies (e.g., intentional use of language) with all stakeholders;
EE	AND reflects on personal biases and seeks resources to enhance their understanding of language, dialects, cultural, social and literacy needs of all stakeholders.
	65. BUILDS RELATIONSHIPS AND COLLABORATES WITH FAMILIES, COMMUNITIES, COLLEAGUES, AND OTHER PROFESSIONALS TO PROMOTE LEARNER GROWTH AND DEVELOPMENT. InTASC 1c, 10b, 10d, 10e
DN	makes little or no effort to effectively build relationships or collaborate with colleagues, administrators, and families.
DE	attempts to build relationships and collaborate with colleagues, administrators, and families.
ME	collaborates with colleagues, administrators, and families to support the specific learning needs of students;
EE	ANDcommunicates effectively to build strong relationships AND seeks out collaborative relationships with community members and other professionals to promote learner growth and development.
	G6. Culturally Responsive Practice: ACCESSES RESOURCES TO DEEPEN AN UNDERSTANDING OF CULTURAL, RACIAL, ETHNIC, GENDER AND LEARNING DIFFERENCES TO BUILD STRONGER RELATIONSHIPS AND CREATE MORE RELEVANT LEARNING EXPERIENCES. InTASC 2k, 9e, 9m
DN	demonstrates little or no attention to cultural, racial, ethnic, gender, and learning differences of students.
DE	occasionally uses curricular and instructional resources that represent and reflect the cultural, racial, ethnic, gender, and learning differences of students to build stronger relationships and create more relevant learning experiences.
ME	utilizes curriculum and resources that reflect the diversity of all learners AND consistently demonstrates knowledge of cultural, racial ethnic, gender, and learning differences of students to build stronger relationships and create more relevant learning experiences;
EE	AND incorporates all learners' experiences, backgrounds, cultures, traditions and community into classroom curriculum and instruction AND incorporates diverse groups that are not represented in the classroom or school community.
	G. Leadership and Collaboration DISPOSITION: SEEKS APPROPRIATE LEADERSHIP ROLES AND OPPORTUNITIES TO TAKE RESPONSIBILITY FOR STUDENT LEARNING, TO COLLABORATE WITH LEARNERS, FAMILIES, COLLEAGUES, OTHER SCHOOL PROFESSIONALS, AND COMMUNITY MEMBERS TO ENSURE LEARNER GROWTH AND TO ADVANCE THE PROFESSION. InTASC 10 p. 10q, 10s, 10t
DN	engages in few opportunities to explore leadership roles and collaborations within the school.
DE	works collaboratively to advocate for students' success and advocates for learners.
ME	ANDactively seeks opportunities to grow and develop as an education professional;
	ANDtakes personal responsibility for contributing to and advancing the profession.

7

Comments:

Suggestions for Continuing Professional Development

#### Areas of Strength:

Areas for Growth:

Student Teacher

Date

8

University Supervisor or Cooperating Teacher

Date