Ferris State University-School of Education
Report Form for Evaluating Student Teacher Performance Activities

Student: ____________________________
University Supervisor: ____________________________

School and City: ____________________________
On-Site Supervising Teacher(s): ____________________________

Date: ____________________________
Visit # (Circle): 1 2 3 4 5 6

Period: ____________________________
Subject/Grade: ____________________________

Guide for Behaviors to Observe:

Planning Instruction
( ) Demonstrates preparation/organization
( ) Creates/follows written lesson plans
( ) Demonstrates knowledge of subject
( ) Plans for all students to experience success
( ) MI Curriculum Benchmark/Standard
( ) Incorporates use of technology

Delivery of Instruction
( ) Signals the start of class/instruction
( ) Presents an anticipatory set
( ) Creates a focus and activates prior knowledge
( ) States clear objective(s)
( ) Presents lesson in logical order
( ) Checks for understanding
( ) Paces lesson appropriately
( ) Maintains smooth transitions
( ) Presents closure, signals end of discussion
( ) Provides clear directions for assignments

Student Evaluation/Assessment
( ) Monitors/assesses student growth
( ) Evaluates student learning
( ) Provides specific/frequent feedback
( ) Implements alternative assessment techniques

Communication Skills
( ) Develops rapport with students/faculty/staff
( ) Calls students by name
( ) Maintains eye contact
( ) Uses correct grammar/appropriate vocabulary level
( ) Writes clearly using proper grammar and spelling
( ) Good penmanship
( ) Provides clear explanations/directions
( ) Exhibits enthusiasm
( ) Uses good feeling tone
( ) Uses praise effectively
( ) Accepts/utilizes student ideas

Professionalism
( ) Models desired behavior
( ) Groomed in an appropriate manner
( ) Professional dress
( ) Participates in professional growth & development
( ) Relates professionally with other faculty/staff
( ) Maintains confidentiality
( ) Contributes & supports colleagues

Comments/Suggestions:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please check one or more of the following statements that you believe are appropriate:
( ) Progress appears to be satisfactory at this time.
( ) Student should seek special help in the areas noted above.
( ) I will request a visit by another university supervisor.
( ) I will arrange a conference involving the student teacher and on-site supervising teacher.

3/03
White Copy: Student Teacher  Pink Copy: Coordinator of Student Teacher Placement  Yellow Copy: Student Teacher