

Teacher Education Program Practicum Evaluation



Student's Name _____ Term & Year _____

Course No. & Title _____ Professor _____

Dear Teacher: Your feedback is an important part of our Teacher Education Program. Please rate the student's performance and provide comments on the back of this form. The student will have access to this feedback, which will be included in the pre-student teaching portfolio.

Please rate the student's performance during the practicum:

	Low			High
Subject matter knowledge	1	2	3	4
Desire to work with students	1	2	3	4
Humor, tolerance, and emotional balance	1	2	3	4
Dependability and professional conduct	1	2	3	4
Positive attitude regarding diversity (socioeconomic status, ethnicity, special needs)	1	2	3	4

-- Add comments on back --

Total number of hours spent with you and your students: _____
(must be filled in for student to receive credit)

Teacher Signature _____ Date _____

Teacher Name _____

E-mail _____ Phone _____

School _____ Dept _____

Please return to: Lawrence University
Education Department
711 E. Boldt Way
Appleton, WI 54911-5699
920-832-6714

You may give this to the student or mail it. For the student to receive credit, the form must be received by:

Thank you for your help! Your cooperation makes our Teacher Education Program possible.