West Virginia University College Of Education and Human Services

FIELD EXPERIENCE EVALUATION

STUDENT___________________________________   DATE____________________

WVU COURSE/INSTRUCTOR ____________________________________________

SCHOOL, CITY_______________________________________________________

GRADE/SUBJECTS______________________________________________________

EVALUATING TEACHER_____________________ EMAIL ______________________

Please rate the student according to the following:

5=Excellent, 4= Very Good, 3=Satisfactory, 2=Needs Improvement, 1=Unsatisfactory,
NA=Not Applicable

Dispositions:
1. Professional attire
2. Attendance
3. Emotional maturity
4. Communication skills
5. Fairness
6. Belief that all children can learn
7. Enthusiasm
8. Rapport with students
9. Organization
10. Reliability
11. Knowledge of subject/content
12. Knowledge of technology

Comments____________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

_____________________________________________________________________

Please return this form to 607 Allen Hall, PO Box 6122, West Virginia University,
Morgantown, WV, 26506.

Please indicate whether you are willing to host pre-service students in the future.
Yes_____ No_____     Would you be willing to host a pair of students? _____
Lesson Plan Feedback Form

1. The student had prepared a lesson plan.  yes  no
2. The plan was complete & related to the CSO’s.  yes  no
3. The plan accounted for learner differences.  yes  no
4. The lesson used a variety of appropriate materials and resources.  yes  no
5. The content was accurate.  yes  no
6. The content was appropriately sequenced.  yes  no
7. Multiple instructional strategies were used.  yes  no
8. 21st century tools and skills were enhanced  yes  no
9. Directions/communications were clear.  yes  no
10. Student created an atmosphere of respect and fairness.  yes  no
11. The assessment of student learning was appropriate  yes  no

Additional Comments:

Preservice teacher signature________________________________________
Cooperating teacher signature_______________________________________
Date________________________

STUDENTS: PLEASE RETURN THIS FORM TO YOUR INSTRUCTOR.