Dakota State University

College of Education

Madison, SD 57042

Phone: (605) 256-5177 Fax: (605) 256-7300

# Cooperating Teacher Evaluation

(To be completed by the Student Teacher)

***Directions*:** Please complete the information using the scale below. Circle the numeral that most closely identifies your observations. The more honest your responses, the more useful the information. The information provided will be used to assess cooperating teachers. Please return to the Director of Field Services at the address above.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Rarely Sometimes Frequently | | | | |
| 1. An active interest was displayed toward my growth and success. | 1 | 2 | 3 | 4 | 5 |
| 1. Specific constructive feedback was provided on a regular basis. | 1 | 2 | 3 | 4 | 5 |
| 1. Support was given toward professional growth. | 1 | 2 | 3 | 4 | 5 |
| 1. The schedule for teaching responsibilities was paced appropriately. | 1 | 2 | 3 | 4 | 5 |
| 1. Information was given to me regarding the school system and school policies, regulations, and procedures. | 1 | 2 | 3 | 4 | 5 |
| 1. Opportunities were provided for me to teach unaccompanied in the room. | 1 | 2 | 3 | 4 | 5 |
| 1. The expectations of the teacher were fair. | 1 | 2 | 3 | 4 | 5 |
| 1. Opportunities were provided for my teacher to converse with my supervisor. | 1 | 2 | 3 | 4 | 5 |
| 1. Opportunities to experiment with ideas from methods classes were provided. | 1 | 2 | 3 | 4 | 5 |
| 1. Opportunities to vary from the teacher’s practices were allowed. | 1 | 2 | 3 | 4 | 5 |
| 1. The teacher was open to my ideas, suggestions, etc. | 1 | 2 | 3 | 4 | 5 |
| 1. Similarities in beliefs and ideas with my teacher were evident. | 1 | 2 | 3 | 4 | 5 |
| 1. The teacher assisted in my growth with classroom management issues. | 1 | 2 | 3 | 4 | 5 |
| 1. My teacher and other school personnel treated me in a professional manner. | 1 | 2 | 3 | 4 | 5 |

**Please comment, using the back if needed.**

1. One strength my teacher had was:
2. One item that I would want my teacher to know is:
3. If I were working with new cooperating teacher, I’d tell them the following:
4. I would / would not recommend my cooperating teacher to others because:

circle one

|  |  |  |  |
| --- | --- | --- | --- |
| Cooperating Teacher: | ***Alex Langner*** | District: | ***Baltic High School*** |
| Student Teacher: | ***Jim Wynia*** | Semester: | ***Spring 2015*** |