

Report of Initial Visit by the University Supervisor with the

Cooperating Teacher and/or the Student Teacher - SED

Student/ID # Click to enter name/ID University Supervisor Click to enter name

**School**  Click to enter school name. **Cooperating Teacher** Click to enter teacher name

**Date of Visit** Click to enter date. **Time of Day** Time **Grade** Grade **Subject** Subject.

**Visit with (Check):**  **Cooperating Teacher**  **Student Teacher**  **Both**

**Topic Discussed (Check):**

Daily Arrival Time

End of Day Time

Last Day of Student Teaching Assignment

Phase-in of Teaching Responsibilities

Co-Teaching

Candidate “In Charge” of Classroom

Preparation of Lesson Plans

Objectives of Student Teaching Experience

Additional Duties and Responsibilities

Typical Daily Schedule

Substitute Teaching Policy

Attendance at:

* Faculty Meetings
* Team Meetings
* Professional Development
* IEP

Attendance at School Events

Notification for Absences

Evaluation of Student Teacher

Disposition (EDA)

Midterm/Final Ratings Completed:

* Danielson wording
* No Blank Lines
* No N/A or Did Not Observe

SOE Points of Emphasis:

* Technology
* Diversity/Culturally Relevant Pedagogy

Attendance at Seminar

Video

Alignment of Instruction with IEP Goals/Objectives (notebook)

Materials for Inclusion

Confidentiality

Letter of introduction to parents

Forms to Distribute During Meeting:

* Honorarium Form
* Common Expectations

Cooperating Teacher Contact Info.

**Other Topics (List)/Comments about the Visit:** Click to enter text.