

Office of Clinical Experiences & Applied Research

Seton Hall University

College of Education & Human Services
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Clinical Placement Alert Form

Level of Clinical Experience:

- Clinical Experience 1 Clinical Practice 1
- Clinical Experience 2 Clinical Practice 2
- Clinical Experience 3

Candidate Program within Educational Studies:

- ESED/DVSL CEAS/ESED
- SCED CEAS/SCED
- SSED SLMS

A report may be initiated by any member of the field experience triad: teacher candidate, cooperating teacher or clinical supervisor.

A. Semester: __Fall __ Spring Year: Date:

Teacher Candidate:

District & School:

Clinical Supervisor:

Cooperating Teacher:

A clinical experience assignment may create challenges which require identification and professional management and/or termination of the placement. A teacher candidate may experience difficulty with the competency area of skills (i.e. classroom skills, management skills); knowledge content (i.e. knowledge of how students develop) or dispositions (i.e. enthusiasm for teaching, interpersonal skills). Concerns should be aligned to InTASC Standards and NJPST.

___ skills (classroom management, organization) ___ knowledge (content, child development) ___ dispositions (enthusiasm, prepared, communication, attire)

B. Explanation of problem and any previous attempts for feedback, modification and/or support:

C. Request for Action:

___ Plan of Action for Improvement ___ Voluntary Withdrawal from Placement ___ Involuntary Withdrawal from Placement

Teacher Candidate Signature Date

Clinical Supervisor Date

Cooperating Teacher Date

If requesting a Plan of Action for Improvement, please complete the first column and identify specific competency (ies) in need of improvement. The rest of the table will be completed at the meeting between teacher candidate, OCEAR Director and Program Director or Department Chair. Complete either Section D or E in accordance with Request for Action.

D. Plan of Action for Improvement

___ skills (classroom management, organization) ___ knowledge (content, child development) ___ dispositions (enthusiasm, prepared, communication, attire)

Identify Specific Competency(ies) in Need of Improvement (skills, knowledge, dispositions)	Describe Strategies for Improvement	Indicate Person Responsible for Implementing Strategies	Establish Time Line For Improvement

E. Decision on Withdrawal from Placement Request (Voluntary or Involuntary):

___ Without Restriction: If the withdrawal is for verified health reasons, for the teacher candidate's personal reasons or for other verified reasons, the teacher candidate may reapply for assignment in a future semester.

___ Probationary: The Director of OCEAR, Program Director, Department Chair and/or Associate Dean for Academic Affairs shall identify the specific problems and will, with the aid of the respective Program Coordinator and Clinical Supervisor identify specific remedial steps to be completed before another assignment can be made. These specific remedial steps shall be filed with the Director of OCEAR with copies forwarded to the Program Director and Department Chair.

___ Terminal: In the exercise of their professional judgment and discretion, the Director of OCEAR, the respective Program Coordinator, the respective Department Chair, and the Clinical Supervisor, may decide to terminate the teacher candidate's placement with no provision for further placement. This determination would require a meeting in front of the Retention Committee. The Department Chair and the Director of OCEAR shall notify the Dean of the College of Education of the decision to terminate the teacher candidate's placement.

Comments:

Teacher Candidate Signature Date

OCEAR Director Date

Program Dir./Dept. Chair/Assoc. Dean Date