



COLLEGE OF EDUCATION AND
HUMAN SERVICES

*Office of Clinical Experiences
and Applied Research*

SETON HALL UNIVERSITY

**Clinical Placement Handbook
Office of Clinical Experiences & Applied Research
(OCEAR)**

College of Education & Human Services (CEHS)

Version 4.1

Teacher candidates are responsible for reviewing this handbook in its entirety and for understanding the requirements and expectations of clinical placements at SHU. Prior to beginning any clinical placement, teacher candidates must sign the Clinical Placement Contract at the end of this handbook and submit a signed copy to OCEAR each semester.

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INTRODUCTION

Clinical experience and practice are integral parts of teacher preparation. It is the teacher education component that provides a vital link between theory and practice and between school districts and the university teacher education programs.

This handbook contains the philosophy, standards, and clinical experience and practice policies of the College of Education and Human Services (CEHS). It was written for teacher candidates, cooperating teachers, school administrators, clinical supervisors, and department faculty.

The handbook also provides teacher candidates, cooperating school personnel, and clinical supervisors and faculty the guidelines and information needed concerning roles, responsibilities, policies, and procedures involved with clinical experiences and clinical practice at Seton Hall University. This handbook should help the teacher candidate, cooperating teacher, and clinical supervisor plan the clinical experience or clinical practice teaching experience cooperatively in order to facilitate communication throughout the semester.

Many people contribute to the success of our clinical placement program. We extend our gratitude and appreciation to the schools and school districts that host our pre-clinical interns and clinical interns/student teachers and especially to the cooperating teachers and administrators who give their time and share their talents in order to help prepare our future educators.

Questions related to clinical experiences should be directed to the university personnel involved in that process. It is our intention and commitment to provide positive and high quality clinical experience and clinical practice placements.

OVERVIEW

The following policies, documents and processes provide the context and information for your clinical experiences and clinical practice during your program of study in the Department of Educational Studies at Seton Hall University.

Pre-clinical and clinical experiences support and facilitate teacher candidates' development of knowledge, skills, and dispositions. Placements are managed, assigned, supervised, and evaluated through the Office of Clinical Experiences & Applied Research (OCEAR). Design, implementation, and evaluation of pre-clinical and clinical experiences are done in collaboration with faculty, staff, and school-based partners to provide optimum opportunities for the professional growth and development of teacher candidates.

New Jersey state law requires those seeking a New Jersey Initial Licensure to complete field-based clinical experiences which include clinical practice/student teaching. These must be completed while enrolled in a State Approved Program under the direct supervision of a teacher holding the appropriate New Jersey Teaching License and a SHU clinical supervisor.

All field-based experiences are components of university courses and are completed at clinical sites selected solely by the university. Clinical sites are selected to assure compliance with CAEP Standards, New Jersey State Law, School District/School policies, procedures, and regulations, and SHU College of Education & Human Services (CEHS) policies and procedures.

As there are changes in institutional policies, placement requests and/or New Jersey Department of Education statutes and licensure requirements, please note the Director of the Office of Clinical Experiences & Applied Research may institute additional requirements during the course of your program of study due to those changes. Any addendums will be announced in a timely manner to all students in a teacher preparation program.

CONTACT INFORMATION

All clinical experience and clinical practice placements are managed by the Office of Clinical Experiences & Applied Research (OCEAR).

Mailing Address:

Office of Clinical Experiences & Applied Research
College of Education & Human Services
Jubilee Hall, Room 434
400 South Orange Ave.
South Orange, NJ 07079

Main Phone Number: (973) 761-9347

Office Website: <http://blogs.shu.edu/cear>

Office Team:

Ms. Karen Grove, Director
Ms. Barbara Cooley, Office Secretary
Graduate Assistant (GA) Support Staff

Please note that all documents and forms in the appendix are available as separate documents on the OCEAR website at <http://blogs.shu.edu/cear>. All evaluation instruments will be distributed electronically for completion by the cooperating teachers, clinical supervisors and teacher candidates. Any person who does not receive the instruments or has any difficulty accessing or completing the instruments should contact OCEAR.

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CODES & STANDARDS

College of Education & Human Services Vision Statement for Teacher Candidates

We strive to develop highly competent, socially conscious, reflective professionals.

This vision informs our program curriculum and professional expectations for all teacher candidates.

Competence: Teachers considered competent within this vision are those who possess knowledge for themselves and also understand how to convey that knowledge to others. Knowledge alone, without the ability to effectively share it, is not enough to teach others.

Social Consciousness: Practicing good stewardship, through a willingness to learn about difference, modeling respect for others, and varying educational approaches to support diverse individuals, is the foundation for the formation of socially conscious candidates and students. Connection and collaboration with colleagues and the community enhance social consciousness.

Reflection: Reflection is a tool to enhance learning, teaching, and leadership. It creates an imbalance or doubt in thinking, which creates opportunities for growth. Candidates who model introspection and self-awareness support environments where students develop reflective skills about their own learning.

College of Education & Human Services Professional Code

Candidates enrolled in the teacher preparation programs in the College of Education and Human Services operate under the following professional code:

Dependability: candidates are reliable, timely, and consistent in their presence and preparation for courses at the university as well as their clinical settings. *Candidates will not use mobile technology for personal reasons while in a classroom setting.*

Respect & Empathy: candidates are respectful in their address, writing, language, and physical space toward faculty, university staff, school personnel, peers, and students in the field.

Open-mindedness: candidates respect the context and experience of others; developing the skills to use that information in classroom conversation, writing, and lesson planning.

Integrity: candidates submit original work, fully cite all sources associated with the development of their work (including information from the internet), and recognize that the university fully supports the use of anti-plagiarism software in support of academic integrity.

Dress code: candidates recognize that they are considered representatives of the university, college, and program when they are in their clinical placements. They are expected to adhere to the dress code of the clinical placement where they are working, recalling that their professional appearance and behavior reflects Seton Hall. (More detailed information can be found later in this Clinical Placement Handbook.)

Passion for the profession: candidates display in action, word, and commitment their passion for the profession of teaching, the right for all children to have access to positive and productive learning environments, and a recognition that life as a teacher means dedication to life-long learning.

Professional Communication and Technology Use: Candidates maintain consistent, timely and professional communication with professors, Seton Hall administrators, supervisors, cooperating teachers, and school administrators in written, telephone, and electronic mail communication. Candidates exercise professional discretion in their use of social media and recognize the responsibility of professional educators to refrain from expressing defamatory opinions of peers, professionals, parents, and students in public platforms. (See additional policies in this Clinical Placement Handbook for additional guidance and information.)

New Jersey Professional Standards for Teachers & InTASC Standards

(NJ Administrative Code: 6A:9-3.3 Professional Standards for Teachers)

Clinical interns must demonstrate and uphold the NJPST to be eligible for teacher certification. The standards describe what every beginning education professional should know and be able to do. In June 2014, the NJPST were reorganized to align to the Interstate Teacher and Support Consortium (InTASC) Standards.

Please visit <http://www.state.nj.us/education/profdev/profstand/> for more detailed information from NJDOE regarding the standards and alignment.

Standard One: Learner Development The teacher understands how learners grow and develop, recognizing that patterns of learning and development vary individually within and across the cognitive, linguistic, social, emotional, and physical areas, and designs and implements developmentally appropriate and challenging learning experiences.

Standard Two: Learning Differences The teacher uses understanding of individual differences and diverse cultures and communities to ensure inclusive learning environments that enable each learner to meet high standards.

Standard Three: Learning Environments The teacher works with others to create environments that support individual and collaborative learning, and that encourage positive social interaction, active engagement in learning, and self-motivation.

Standard Four: Content Knowledge The teacher understands the central concepts, tools of inquiry, and structures of the discipline(s) he or she teaches, particularly as they relate to the Common Core Standards and the New Jersey Core Curriculum Content Standards and creates learning experiences that make these aspects of the discipline accessible and meaningful for learners to assure mastery of the content.

Standard Five: Application of Content The teacher understands how to connect concepts and use differing perspectives to engage learners in critical thinking, creativity, and collaborative problem solving related to authentic local and global issues.

Standard Six: Assessment The teacher understands and uses multiple methods of assessment to engage learners in examining their own growth, to monitor learner progress, and to guide the teacher's and learner's decision-making.

Standard Seven: Planning for Instruction The teacher plans instruction that supports every student in meeting rigorous learning goals by drawing upon knowledge of content areas, curriculum, cross-disciplinary skills, and pedagogy, as well as knowledge of learning and the community context.

Standard Eight: Instructional Strategies The teacher understands and uses a variety of instructional strategies to encourage learners to develop deep understanding of content areas and their connections, and to build skills to apply knowledge in meaningful ways.

Standard Nine: Professional Learning The teacher engages in ongoing individual and collaborative professional learning designed to impact practice in ways that lead to improved learning for each student, using evidence of students achievement, action research, and best practice to expand a repertoire of skills, strategies, materials, assessments, and ideas to increase student learning.

Standard Ten: Leadership and Collaboration The teacher seeks appropriate leadership roles and opportunities to take responsibility for student learning, to collaborate with learners, families, colleagues, other school professionals, and community members to ensure learner growth, and to advance the profession.

Standard Eleven: Ethical Practice The teacher acts in accordance with legal and ethical responsibility and uses integrity and fairness to promote the success of all students.

National Professional Associations' Standards

Professional teaching standards by content area have been established by official national organizations. If a teacher candidate has not already done so, it is recommended to become familiar with the national standards in your subject area. These standards serve as the cornerstone for the national education reform initiative. Each organization has placed a strong emphasis on developing performance benchmarks for grades P-12 that reflect a national perspective on student achievement. They are based on the theoretical and pedagogical knowledge, skills, and dispositions that teacher candidates should be demonstrating when teaching and collaborating with parents and colleagues. Teacher candidates should consider joining appropriate organizations as a member.

Below are links for professional teaching standards by content area as established by official national organizations. Some of the websites have a specific link to the standards; for others, it may be necessary to explore the website to find the “standards.”

NJ Core Curriculum Content Standards (NJCCCS): www.state.nj.us/njded/cccs

National Association for the Education of Young Children (P-3): www.naeyc.org

Association for Childhood Education International (K-6): www.acei.org

Association for Middle Level Education (6-8): <http://www.amle.org/>

National Art Education Association: <https://www.arteducators.org/>

National Council of Teachers of English: <http://www.ncte.org>

American Council on the Teaching of Foreign Languages: <https://www.actfl.org/>

International Literacy Association: <https://www.literacyworldwide.org/>

National Council of Teachers of Mathematics: <http://www.nctm.org/>

National Science Teachers Association: <https://www.nsta.org/>

National Council for the Social Studies: <http://www.socialstudies.org/>

National Association of **Special Education** Teachers: <http://www.naset.org/>

Another good source of information is:
Association for Supervision and Curriculum Development
ascd.org

Council for Exceptional Children (CEC) Ethical Principles and Standards

Beyond the professional dispositions expected by the CEHS, some professional associations have additional expectations. For example, the Council for Exceptional Children (CEC) has its own professional ethics for serving children with disabilities.

These standards and principles can be accessed at the following URL
<https://www.cec.sped.org/Standards/Ethical-Principles-and-Practice-Standards>. A more thorough discussion of these will be provided in the introductory special education courses (CPSY 1001 and CPSY 1002).

GLOSSARY OF TERMS

In November 2015, the NJ Department of Education (NJDOE) proposed changes to the language and terminology used in teacher/educator preparation programs throughout the state. In an effort to align with state language, the Department of Educational Studies at Seton Hall University adopted the following terms for our placements.

Pre-Clinical Intern: Is any teacher candidate in a 60 hour placement not in their final year of clinical placement; typically refers to sophomore and junior teacher candidates; graduate students in our CEAS are not pre-clinical interns at any point in their program

Clinical Intern: Is a teacher candidate in the last year of their program; a clinical intern could be in the semester of two-day per week or full-time, five day a week clinical practice placement

Clinical Experience: Any placement where a pre-clinical intern is NOT in their final year of full-year placement

Clinical Practice 1: The first semester of the full-year clinical placement; the semester when, based on CEHS policy, teacher candidates are in their placement for two full days a week for the entire semester

Clinical Practice 2: The second semester of the full-year clinical placement; the semester when teacher candidates are in their placement five days a week and follow the district's school calendar, not Seton Hall's

Cooperating Teacher: The P-12 teacher employed by a school or district who is mentoring the pre-clinical or clinical intern throughout their clinical experience or practice during the semester. In some districts, the cooperating teacher is referred to as the mentor teacher.

Clinical Supervisor: A Seton Hall University employee who observes and evaluates a teacher candidate in their clinical placement. The clinical supervisor is one of the main points of contacts for a teacher candidate during their clinical placement and also serves as a point of contact for the cooperating teacher on behalf of OCEAR.

Office of Clinical Experiences & Applied Research (OCEAR): The office responsible for coordinating all pre-clinical and clinical placements, communicating with clinical supervisors, cooperating teachers and teacher candidates, hiring and assigning clinical supervisors and building and managing relationships with P-12 schools and districts.

EART – Tracking Education or Pre-Education Major: EART is the abbreviation of the major code within SHU's student record system. EART is for teacher candidates enrolled in the College of Education & Human Services (CEHS) but have not met all of the state required entrance criteria to be a full education major in any program. These students are tracking education or pre-education and follow the same program requirements as ESED, SCED or SSSED until they officially join a program, typically in their sophomore year.

ESAB – Elementary Education with an ABA track: ESAB is the abbreviation of the major code within SHU's student record system. ESAB is for teacher candidates enrolled in the College of Education & Human Services (CEHS) dual certification program in Elementary Education and Special Education who are also seeking certification in Applied Behavioral Analysis (ABA) Therapy.

ESED – Elementary Education/Special Education Program: ESED is the abbreviation of the major code within SHU's student record system. ESED is for teacher candidates enrolled in the College of Education & Human Services (CEHS) dual certification program in Elementary Education and Special Education.

CEAS – Certificate of Eligibility with Advanced Standing: This is the type of certification candidates earn after completion of a teacher preparation program in the state of NJ. However, this is also the acronym used at SHU to identify the post-baccalaureate candidates in our graduate teacher preparation program. A CEAS candidate can be either an Elementary Education or Secondary Education candidate. Each CEAS candidate already has a Bachelor's Degree not in education.

DVSL – 4+2 Speech & Language Pathology Program: DVSL is the abbreviation of the major code within SHU's student record system. DVSL is for teacher candidates enrolled in the CEHS 4+2 program where they receive an undergraduate degree and certification in Elementary Education and Special Education followed by admittance into the 2 year graduate program for Speech & Language Pathology.

SCED – Secondary Education Program: SCED is the abbreviation of the major code within SHU's student record system. SCED is for teacher candidates enrolled in the College of Education & Human Services (CEHS) Secondary Education program; these teacher candidates are also majoring in a secondary education content area.

SSED – Secondary and Special Education Program: SSED is the abbreviation of the major code within SHU's student record system. SSED is for teacher candidates enrolled in the College of Education & Human Services (CEHS) Secondary and Special Education program; these teacher candidates are also majoring in a secondary education content area.

APPLYING FOR CLINICAL PLACEMENT

Teacher candidates must apply for clinical placement in order to be considered for placement in a given semester. Timeframes and deadlines for application are communicated via email, are posted on the OCEAR website and are posted outside of the OCEAR office. It is the teacher candidate's responsibility to meet the timeframes and deadlines provided. **Appendix 1** of this handbook provides an overview of the reoccurring requirements and deadlines during an academic calendar year.

An email with a link to the correct application will be sent prior to deadlines. However, teacher candidates can always access the applications on the OCEAR website at <http://blogs.shu.edu/cear>.

Clinical Experience Application for Pre-Clinical Interns

Teacher candidates must apply for clinical experience the semester prior to the semester for which the placement is being requested. For example, a Fall semester placement has an application deadline of March 1st of the prior Spring semester.

Clinical Practice Application for Clinical Interns

With the NJDOE two semester clinical practice requirement, most teacher candidates will be on a Fall/Spring semester rotation. Applications for a fall placement are due by February 15th of the prior Spring semester. For those few exceptions on a Spring/Fall clinical practice rotation, applications are due by September 15th of the prior Fall semester.

REGISTRATION AND PLACEMENT REQUIREMENTS

Applying for clinical experience or clinical practice is only one step in the list of requirements for being placed in a clinical placement. In order to receive a grade for a clinical experience, teacher candidates must register for the corresponding Clinical Experience course.

Clinical Experience & Clinical Practice Course Registration

When meeting with a faculty advisor for advisement for the following semester, teacher candidates should confirm which clinical experience course coincides with the clinical placement.

As a general guide:

Clinical Experience 1 – register for EDST 2500 JA

Clinical Experience 2 – register for EDST 2600 JA

Clinical Experience 3 – register for EDST 2700 JA

Clinical Practice 1 – register for EDST 2800 JA (Undergraduate) or EDST 6334 EX (Graduate)

Clinical Practice 2 – teacher candidates register for the seminar course corresponding to their major (EDST 4001, EDST 4500 or EDST 6426)

In some cases, teacher candidates are required to complete an additional placement to complete course work, align to courses as a transfer student or to meet out-of-state licensure requirements. Teacher candidates completing that course work should register for EDST 2500 EX.

Appendices 2, 3, 4 and 5 provide an overview of the clinical placement requirements for ESED/DVSL, SCED, SSED and CEAS, associated courses, clinical placement course numbers and related clinical/field assignments

Clinical Experience Placement Requirements

Before being placed in a clinical experience, teacher candidates must have met the following criteria:

1. Admission into an Educational Studies major
2. Overall 3.0 GPA or higher
3. A grade of 'C' or higher in all Education courses
4. Completion and compliance with all Department of Educational Studies (EDST) policies for pre-placement requirements

Clinical Practice Placement Requirements

Before being placed in clinical practice, teacher candidates must have met the following criteria:

1. A minimum cumulative grade-point average of 3.0;
2. At the time of application, completion of all required Professional Education courses with a grade of C or higher;
3. Successful completion of all required clinical experiences;
4. Passing scores on all required Praxis II exams or state-mandated scores on standardized tests before your application will be considered for clinical practice;
5. Approval and recommendation by advisor along with an approved application
6. Completion and compliance with all Department of Educational Studies (EDST) policies for placement requirements.

EDST DEPARTMENT POLICIES FOR CLINICAL PLACEMENTS

Attendance Documentation and Timesheets

For security purposes, teacher candidates will document attendance at the main office or security desk at the district/school placement upon arrival and departure. Teacher candidates will also maintain a timesheet that documents the dates and times of attendance. This timesheet must be signed by a school administrator or Cooperating Teacher and must document relevant daily activities.

Teacher candidates completing a clinical experience or Clinical Practice 1 are required to submit both a midterm and final timesheet. Teacher candidates can access this timesheet on the OCEAR website at <http://blogs.shu.edu/cear>. **Appendix 6** is an example of the pre-clinical intern timesheet. In total, the midterm and final timesheets need to document and verify a minimum of 60 hours in the clinical placement. The Clinical Practice 1 is two days a week.

Teacher candidates completing Clinical Practice 2 are only required to submit a final timesheet. By NJ code, teacher candidates are required to complete a minimum of 15 five-day weeks during clinical practice. The clinical practice timesheet is also available on the OCEAR website at <http://blogs.shu.edu/cear>. **Appendix 7** is an example of the clinical intern timesheet.

Bereavement Policy

All candidates in clinical placement are eligible for bereavement leave. In the event of the death of a member of a candidate's immediate family, defined as a candidate's spouse, partner, parent(s), parent(s)-in-law, child, brother, sister or any relative residing in the same household, the candidate shall be granted leave for a period of up to three (3) consecutive days at the time of death. Under extenuating circumstances, such leave may be extended for an additional two (2) days, with prior written approval from the Department of Educational Studies, in consultation with OCEAR. In the case of a grandparent, aunt, uncle, brother-in-law, or sister-in-law, niece or nephew, a candidate shall be granted a leave of absence of two (2) consecutive days. If a candidate meets all state code requirements for placement hours, bereavement days are not required to be made up.

Blood-Borne Pathogens and First Aid Treatment

During their pre-clinical or clinical placements, teacher candidates may be required to provide first aid treatment or may be in a situation in which they could be exposed to blood or body fluids. In this position, teacher candidates must always practice universal precautions. Universal precautions is an approach to infection control in which all human blood body fluids are treated as if they are infected with HIV, Hepatitis B, or other blood borne pathogens, regardless of perceived status of the source individual. Exposure to potential infectious materials can be minimized through the use of universal precautions such as using rubber gloves (available at the school site) and other tactics employed to avoid direct contact with blood and body fluids. When first reporting to a placement, teaching candidates should take the initiative to find out what procedures are followed at that school site and where the first aid materials are kept.

Teacher candidates who are inadvertently exposed to human blood or other body fluids should immediately cleanse the affected area with soap and water, wash their hands and report the incident to the school nurse, the school site office and OCEAR. The school administrators/nurse, will follow up as to whether or not the individual has any reported communicable disease. Teacher candidates who have had an exposure incident should report it

to the Seton Hall University Health Center or a private licensed healthcare professional for assessment of the need for treatment.

Teacher candidates should not give any medication, even cough drops and/or other over the counter medications including aspirin, Tylenol or Advil to students or other school personnel to avoid any liability.

Cell Phone Use

The College of Education & Human Services recognizes a clinical intern may need to make a personal telephone call during the workday when the phone call cannot be made before the clinical intern reports to work and/or after the clinical intern's day has concluded.

In the event a clinical intern has an occasion to make a personal telephone call during their day, and the call is of such a nature that it cannot be made before the school day begins or after the school day has concluded, the clinical intern may make a personal phone call using their personal cellular phone during the workday provided:

- The telephone call is made during the clinical intern's **duty free lunch or break periods** and is made **outside the presence of students** either in an **area inside or outside the school building designated by the cooperating teacher or building administrator**.
- A personal telephone call by a clinical intern on their personal cell phone shall **not be made while the clinical intern is performing assigned school responsibilities**.

In the event the clinical intern has an **emergency requiring immediate attention** that requires the personal use of their personal cellular telephone, the clinical intern shall **inform their cooperating teacher before or immediately after using the cellular telephone**, depending on the nature of the emergency.

Any other non-emergent use of a personal cell phone, such as texting, checking social media sites or emails are not to take place when a clinical intern is in the presence of students or performing school responsibilities. These activities should only be conducted during a lunch or break period.

As pre-clinical interns are only in a clinical placement one day a week, there should not be a need, other than emergencies, for a pre-clinical intern to use a cell phone during hours at a clinical placement.

Change in Placement Policy

Changes will not be made once a placement has been confirmed by a school/school district. Teacher candidates may not contact schools or districts in attempts to secure a placement. This behavior is cause for disciplinary action, including removal from the program. Candidates who reject placements may not be placed until the next semester in which placements are made.

Service as a cooperating teacher is a voluntary professional activity. School districts, schools, and other agencies also voluntarily provide prospective sites for student teaching placements as a professional courtesy. They also have the right to cancel placements if they determine, based on professional judgment, that a pre-clinical or clinical intern's deficiencies in knowledge, skills, or dispositions is negatively impacting learners, teachers, or other members of the school. (See the policy in this handbook regarding Removal from a Placement for additional information.)

Clinical Evaluation Pass with Remediation Policy

Teacher candidates in clinical experience receive a grade on the Observation & Conference Report evaluation from both their cooperating teacher and clinical supervisor. Final grades are a **P (Pass)**, **PR (Pass with Remediation)** or **F (Fail)**. When there is a conflict between supervisor and cooperating teacher evaluation grades for an experience, the default grade for the clinical experience will be the lower of the two grades; necessitating a meeting between the teacher candidate, field director and department chair or program director. A review of all available evidence will determine the final grade assignment for the clinical experience. If a Pass with Remediation remains as the grade on record an intervention plan, developed and agreed upon at the meeting, will be put in place for the teacher candidate's following placement. Any teacher candidate receiving a Fail as a grade for clinical experience will be required to redo the placement.

Clinical Placement Attendance

Teacher candidates acknowledge they must make up *all* absences, and realize that failure to do so could result in an "Incomplete" in courses related to clinical practice and a "Failure" in clinical practice. OCEAR acknowledges that emergencies and illnesses can occur. Each situation will be evaluated based on circumstances and absences. During clinical practice, teacher candidates are to follow the district's calendar, not Seton Hall's calendar.

Teacher candidates in clinical experience must complete 60 hours for their clinical placement. Teacher candidates in clinical experience are responsible for communicating and adhering to a schedule mutually convenient for the cooperating teacher and the teacher candidate.

If absent or delayed, teacher candidates, by 8 am on the morning of an absence, will call the following: Cooperating Teacher, any required district personnel (i.e. – school nurse, office secretary or a central office) and the Office of Clinical Experiences (OCEAR). Regardless of whether a clinical supervisor is scheduled to come that day, he/she should also be notified of the absence. OCEAR can be reached at (973) 761-9347.

Communication with Parents

During a candidate's clinical experiences and particularly during the full year clinical practice, opportunities to interact with parents at parent-teacher conferences or at other school events or meetings may occur. At no time is a teacher candidate to act as the primary contact or initiate communication with parents regarding any matter. Mentor/cooperating teachers are to be the main point of contact and communication with parents.

In addition, teacher candidates should be aware that any written communication – email, letter, etc. – regarding student progress becomes part of a student's permanent record in many districts and placements. Teacher candidates should use care and caution when communicating in writing with any school personnel including cooperating teachers, administrators and parents.

Communication with SHU and Clinical Placement Personnel

Teacher candidates understand that *timely* communication with their Cooperating Teacher, Clinical Supervisor, representatives of the Office of Clinical Experiences and other school or university officials is an important aspect of professionalism. Teacher candidates agree to regularly read and respond to email communications and telephone messages. Teacher candidates will respond to all email messages as soon as possible and *no later than 24 hours* of receipt of a message.

Prior to starting in a placement, if a teacher candidate has problems or questions about his/her placement, his/her Clinical Supervisor or his/her Cooperating Teacher, the teacher candidate

agrees to contact the Director of the Office of Clinical Experiences and Applied Research (OCEAR) as soon as possible. Contact information for the OCEAR Director is located in the front of the Clinical Placement Handbook. Once in a placement, policies and resources for communication need to be followed.

If a teacher candidate experiences any difficulties with his/her Seton Hall email account, teacher candidates and clinical supervisors are responsible for contacting the Help Desk at 973-275-2222, ext. 2222 from on campus or at helpdesk@shu.edu to resolve any problems within 3-5 business days.

Confidentiality Statement

During a candidate's work as a pre-clinical or clinical practice teacher candidate you may have access to students' records, including but not limited to, grades, transcripts, IEPs, 504s, medical/psychological records. Teacher candidates may participate in conferences with teachers, parents/guardians and other meetings.

In addition, teacher candidates should be aware that any written communication – email, letter, etc. – regarding student progress becomes part of a student's permanent record in many districts and placements. Teacher candidates should use care and caution when communicating in writing with any school personnel including cooperating teachers, administrators and parents.

Teacher candidates acknowledge the proprietary nature of such information and agree to keep all information confidential.

Conflict of Interest Policy

Placements will be made to ensure no conflicts of interest occur. Candidates deserve an experience that is free of bias and external influence. Teacher candidates will not be placed in schools where family members or significant others attend, are employed or serve on school boards. Candidates will also not be placed where the candidate attended school or have family members attending. Placement in a district may be denied based on other factors not listed here and is at the discretion of the district, school and OCEAR.

Convocation Attendance

Attendance for the entire duration of convocation is mandatory for every teacher candidate during each semester of a clinical placement. The only excused absence for convocation is a SHU scheduled course or other University mandated event/activity. Teacher candidates with a class conflict must notify OCEAR prior to convocation of the conflict. Every attempt must be made to attend convocation prior to or after the class conflict.

Any absence other than course related will require documentation to verify the absence.

For those teacher candidates with an approved absence from convocation, there will be group sessions the week following convocation. Teacher candidates must attend one of the makeup sessions. A teacher candidate cannot begin any clinical placement hours until they have either attended convocation or attended a makeup session.

Cooperating Teacher Leaving the Room

The student teacher may be in the classroom by himself/herself for short periods of time when there is a necessity. This should only occur when the cooperating teacher decided that the clinical intern can independently manage the classroom. If any emergency arises and the cooperating teacher must leave the room for more than a few minutes, she/he should tell another licensed teacher that the clinical intern is in the room alone. During the clinical intern's

full-time teaching part of the placement, the cooperating teacher may leave the room. The cooperating teacher should always inform the student teacher of where he/she is going in the building.

As the relationship is one of mentoring and guidance, it is strongly recommended that cooperating teacher absences from the room be reserved for emergencies only.

Criminal Background Check Policy

As part of your program for initial licensure in the Department of Educational Studies, you are required to complete a NJ Criminal Background Check (CBC), which includes being fingerprinted via the appropriate NJ approved offices.

All undergraduate students are required to complete a NJ Criminal Background Check during the spring semester of their freshman year. Transfer students are required to complete it during their first semester in the program. The first NJ CBC must be completed as a substitute and be done using the SHU Codes as follows: County - **Essex (13)** / District – **Seton Hall University (7295)** / School – **Seton Hall University (001)**. Detailed instructions for completing the NJ Criminal Background Check are posted on our site at <http://blogs.shu.edu/cear/fingerprinting-and-background-check/>.

Criminal Offenses Preventing Teacher Certification – Prior to Criminal Background Check Policy

As required by New Jersey law, the State of New Jersey, Department of Education will not issue a teaching certificate, in most cases, to anyone with a criminal history of certain disqualifying offenses. Similarly, New Jersey facilities, centers, schools, and school systems under the supervision of the Department of Education are barred from employing such individuals in positions which involve regular contact with pupils under the age of 18.

NJ Statute **N.J.S.A.18A:6-71** defines the crimes and offenses that may prevent a student from being eligible to participate in clinical experience or clinical practice placement in a school, district or agency. A conviction or charges pending for any of the following crimes or offenses may prohibit work in K-12 schools in NJ.

These disqualifying crimes/offenses include:

- Any crime of the first or second degree;
- Any crime involving sexual offense or child molestation;
- An offense involving the manufacture, transportation, sale, possession, distribution or habitual use of drugs or any violation involving drug paraphernalia;
- Any crime involving the use of force or the threat of force to or upon a person or property, including, but not limited to, robbery, aggravated assault, stalking, kidnapping, arson, manslaughter and murder;
- Any crime of possessing a weapon;
- A third degree crime of theft or a related offense;
- An offense of recklessly endangering another person, terroristic threats, criminal restraint, luring or enticing a child into a motor vehicle or isolated structure;
- An offense of causing or risking widespread injury or damage;
- Any crime of criminal mischief, burglary, usury, threats or other improper influences, perjury and false swearing, resisting arrest, or escape;
- Any conspiracy to commit or attempt to commit any of the crime described above.

Students are encouraged to read statute **N.J.S.A.18A:6-71** in its entirety to confirm any changes to the statute.

Students who believe they may have a disqualifying offense on their record are encouraged to seek legal counsel regarding removal or expungement of the offense. If a student is unable to locate or afford legal counsel, you are encouraged to contact the Director of OCEAR directly. There may be support available via the Seton Hall University Law School.

Criminal Offenses Preventing Teacher Certification – Post Criminal Background Check Policy

A student who completes the NJDOE Criminal Background Check (CBC) process and has their CBC returned as not approved will 1. Not be eligible for placement and/or 2. Will be immediately removed from placement. An unapproved CBC is likely a result of one of the offenses in NJ Statute **N.J.S.A.18A:6-71**.

The student will be encouraged to seek legal counsel regarding removal or expungement of the offense. If a student is unable to locate or afford legal counsel, you are encouraged to contact the Director of OCEAR directly. There may be support available via the Seton Hall University Law School.

It is important to note that any student with a disqualifying offense preventing them from clinical placement may also be barred from employment in schools, districts and agencies under the supervision of the Department of Education which involve regular contact with pupils under the age of 18. Students who are denied a background approval will be prohibited from clinical placement through the College of Education & Human Services at SHU until they are able to obtain an approved CBC.

Diversity, Equity, and Inclusion Vision Statement

Our vision is to empower all members of our community and the communities we serve in order to dismantle inequities within our policies, systems, programs, and services caused by social injustice and racial trauma. We are committed to engaging the voices of our community to promote equity.

Diversity Policy for Clinical Placement

All initial teacher candidates in EDST must complete a clinical experience with P-12 students from diverse groups including students with exceptionalities, English Language Learners, diverse socio-economic levels, gender, race and ethnicity.

Initial Programs Procedures:

1. The Office of Clinical Experiences and Applied Research (OCEAR) places teacher candidates in schools for Clinical Experiences 1 and 2. Candidates are responsible for filling out the demographics of the classroom/ school and returning the form to OCEAR.
2. Before placing a candidate in Clinical Experience 3, the OCEAR reviews each candidate's placements to ensure they have had experiences in urban and suburban settings as well as experiences with ELLs and students with exceptionalities.
3. As needed, the placement for Clinical Experience 3 will make up any deficit, to ensure each candidate has experiences in all of the categories.
4. The OCEAR will track each individual candidate. In the case the candidate has completed the three clinical experiences and is missing a category, the OCEAR will place a candidate for Clinical Practice 1 in a setting to ensure diversity.

Appendix 8a is the complete policy, including the diversity chart to be completed by teacher candidates at the start of each clinical placement.

Advanced Program Procedures:

The NJDOE requirement for candidates in an advanced degree program to complete 50 hours of experience in diverse settings prior to clinical practice is where these candidates are asked to track their diversity experiences. **Appendix 8b** also includes the diversity chart used by the post-baccalaureate candidates.

On this form, similar to the initial program candidates, hours and demographic information are provided. A review of this data helps determine the diversity requirements still to be met in the candidate's clinical practice. The OCEAR, in conjunction with the CEAS program director, will review each individual candidate's 50 hours. In the case the candidate has completed these hours and is missing a category, the OCEAR will seek additional hours in an alternate setting, a split placement in two settings, or another placement option to ensure diversity prior to allowing that candidate to apply for certification.

Interviewing Policy

Clinical Interns are permitted to attend interviews during their clinical practice placement for jobs that are professionally orientated to full-time employment. In all types of job seeking experiences arrangements should be made with the cooperating teacher, school administrator, and clinical supervisor concerning the absence for interviews.

Jury Duty Policy

Any candidate who is summoned for jury duty must provide proof of the summons prior to the start of the dates of jury assignment. After completion of jury assignment, evidence of completion of the assignment must be provided. All documents should be provided to OCEAR as soon as a summons for assignment has been received by a candidate. The length of jury assignment and level of clinical placement will determine if hours will be excused or if any will need to be completed later in the semester.

Long Term Cooperating Teacher Absence

If the cooperating teacher is expected to be absent for an extended period of time (in excess of a week), the clinical supervisor and OCEAR Director must be contacted to determine whether alternative arrangements must be made.

Mantoux/Tuberculosis Health Test

The NJ Department of Health and NJ Department of Education requires all new teachers in a district to document a negative test result within six months of being in a district. In order to meet this requirement for all of the Department of Educational Studies teacher candidates, it is **required for all students in the teacher preparation programs to complete the NJ Mantoux/TB testing during the month of August each academic year they are required to complete clinical experience work in a school.** A test in August will meet both the Fall and Spring semester timelines for results within six months of placement. Teacher candidates who do not submit the required test and documentation in August of each year risk losing an approved clinical experience or clinical practice placement during that academic year.

Mantoux (TB) Test

All teacher candidates, both pre-clinical and clinical interns, are required to be tested for TB. The exception to this policy is if a teacher candidate provides documentation for a valid religious exemption.

Teacher candidates have to be tested within six months before their placement begins if they received negative test results.

If a teacher candidate has received positive results in the past, they do not have to be retested. Any teacher candidate in this situation is permitted to enter the school if they are asymptomatic or, if they have symptoms, have been medically cleared to enter the school.

A TB skin test requires two visits to a health care provider. On the first visit the test is placed; on the second visit the health care provider reads the test. A person given the tuberculin skin test must return within 48 to 72 hours after the first visit to have a trained health care worker look for a reaction on the arm.

The TB skin test is performed by injecting a small amount of fluid (called tuberculin) into the skin on the lower part of the arm.

Teacher candidates can be tested by Health Services at Seton Hall or by another healthcare provider.

There is additional information available on the OCEAR website at <http://blogs.shu.edu/cear>.

Policy for Reporting Suspected Child Abuse

Teacher candidates are state mandated reporters. Any teacher candidate suspecting or becoming aware of child abuse (physical, emotional, or sexual) is required to inform his/her cooperating classroom teacher and/or school principal. New Jersey state rules as well as district policies must be followed in making reports regarding child abuse. This is for the teacher candidate's protection as well as safeguarding the child/student. The teacher candidate should contact the clinical supervisor or Director of Clinical Experiences and Student Teaching if questions arise.

The following two websites are available from New Jersey regarding reporting of suspected child abuse:

Department of Children & Families – How & When to Report -

<http://www.nj.gov/dcf/reporting/how/>

Department of Children & Families – Publications on Child Abuse & Neglect -

<http://www.state.nj.us/dcf/news/publications/abuse.html>

Praxis II Policy

For Secondary Education majors, **May 1st** for placement in Clinical Practice 1 in the Fall semester and **December 1st** for placement in Clinical Practice 1 in the Spring. Any secondary education or secondary special education intern who does not pass Praxis II by these dates will need to meet with the Secondary Education Program Director to determine advancement in the program.

For the Class of 2023 and all subsequent graduation years in Elementary Education, all Praxis II sections must be passed by **Feb 15th of Junior year** in order to receive a placement for Clinical Practice 1 in the Fall Semester. If not passed by this time, the application for Clinical Practice 1 will not be accepted until all four sections are passed. For a Clinical Practice 1 placement in Spring semester, all four sections of Praxis II must be passed by **September 15**. Any intern in any track in the elementary education program who does not meet these dates will need to meet with the Elementary Program Director(s) to determine advancement in the program.

PRAXIS INFORMATION

(The NJ DOE may change pass rates or test requirements, providing notice of the change, and we are bound to the rules and code of the state in order to insure licensure.)

- ✓• Use the chart in **Appendix 9** to locate the test you need to take as per your certification.
- ✓• NJ Test Code: 7666 Seton Hall Test Code: RA2811
- ✓• For more information, on registering for a test, please visit the ETS Website at <http://www.ets.org/praxis/nj/requirements>

Appendix 9 has detailed information on Praxis II registration and passing scores.

Please note that students for whom English is a Second Language (ELL or ESL) are eligible to apply for additional time accommodations provided by ETS. Information on PLNE (Primary Language Not English) accommodations can be found at https://www.ets.org/praxis/register/plne_accommodations/.

Professional Dress

Teacher candidates' dress and grooming shall neither present a risk to the health, safety, or general welfare of students or others in the school nor interfere with or disrupt the educational process or environment. When at the placement site, pre-clinical and clinical interns will comply with the following dress standards:

1. Teacher candidates will not wear t-shirts, shorts, sweatpants, yoga pants, sweatshirts, or gym (tennis, athletic) shoes. All teacher candidates should wear appropriate closed toe shoes.
2. Teacher candidates will not wear hats, caps, or sunglasses while in the school/site building. Exemptions to this policy will be made for religious reasons.
3. Properly fitting, professional clothing is to be worn at all times.
4. Teacher candidates will not wear flip-flops at a school placement.
5. It is the responsibility of teacher candidates to assess the appropriateness within their clinical placement setting with regard to any tattoos and/or body piercings and determine if they need to be covered or removed while in the school/district.

Professional Expectations

Each clinical placement throughout a teacher candidate's program has different course requirements connected to the experience. In addition, pre-clinical interns and clinical interns will have increased expectations and responsibilities as one progresses through the program. There are expectations, requirements and responsibilities detailed throughout the Clinical Placement Handbook. It is the responsibility of the teacher candidate to review the expectations and requirements and communicate such to the cooperating teacher and clinical supervisor.

Protecting God's Children Workshop Policy

On May 10, 2019, the NJ Senate passed NJ S2711. The code requires all education preparation programs to provide sexual abuse awareness and prevention training for education candidates. As a Catholic University, serving many districts and schools with Catholic affiliations, the Department of Educational Studies established a policy in 2016 to have all teacher candidates complete the Protecting God's Children Workshop. The Protecting God's Children Workshop meets both the state and department requirements for training.

Protecting God's Children® for Adults is training conducted by VIRTUS® certified facilitators on the prevention of child sexual abuse. The training makes participants aware of the signs of child sexual abuse, the methods and means by which offenders commit abuse, and five easy steps one can use to prevent child sexual abuse. Two videos are the centerpiece of the training: **A Time to Protect God's Children™** and **A Plan to Protect God's Children™**. The

facilitators incorporate policies and procedures into the training defining child sexual abuse, addressing the reporting of child sexual abuse, the screening and selection of employees and volunteers, and victim advocacy. **If for some reason you are uncomfortable participating in this training, please reach out to the Department Chair of Educational Studies to discuss your concerns confidentially.**

In January 2018, the EDST department faculty determined the Protecting God's Children Workshop will be offered on campus once a semester. This workshop is offered throughout many dioceses, including the Archdiocese of Newark. *Please note that in accordance with the Archdiocese of Newark policy, SHU does not recognize the online training for certification. Candidates must attend an in-person session.*

Candidates who have not completed the workshop by the midpoint of their first semester of clinical experience will be scheduled for a mandatory meeting with the Retention Committee. If a teacher candidate transfers into a teacher preparation program or, for some other reason, does not complete the Protecting God's Children workshop in their freshman year, the teacher candidate is responsible for registering, attending and providing a copy of the completion certificate to OCEAR prior to their first clinical experience. Graduate students must complete the workshop and provide a copy of the completion certificate prior to their clinical practice 1 semester.

Reporting of Violence or Threat

The College of Education & Human Services and OCEAR want all teacher candidates to have positive, successful pre-clinical and clinical teaching experiences. Your responsibilities to your placement site, Seton Hall University, and your colleagues include reporting all incidents of threats or violence. It is essential that such incidents be reported in a timely manner.

If a teacher candidate witnesses or is subject to an incident of threat or violence, he/she is to follow the below guidelines:

1. Immediately report the incident of threat or violence to his/her cooperating teacher.
2. Ask the cooperating teacher to report the incident of threat or violence to the school administration.
3. Follow the guidelines and policies of the placement site for such incidences.
4. Within 48 hours, report the incident of threat or violence to the clinical supervisor and the Director of OCEAR so we can provide assistance and support.

Resume Development and Submission to OCEAR

As an increased number of K-12 school districts require teacher candidates to provide an updated resume for clinical experience placements, each candidate in the EDST program is required to provide the OCEAR with an updated, electronic copy of his/her resume no later than March 1st of each Spring semester. A delay in providing an updated resume or a failure to provide one may either delay or prohibit a clinical experience placement in the following semester.

The College of Education and Human Services has an assigned Counselor in The Career Center who can assist candidates with resume development, interview preparation and a job search. Teacher candidates can seek assistance from the SHU Career Center by visiting www.shu.edu/go/careers or calling 973-761-9355. Be sure to ask for a copy of the American Association for Employment in Education (AAEE) Job Search Handbook which is an excellent resource for teacher candidates.

Separation from Clinical Placement

Voluntary

A teacher candidate may voluntarily ask to be removed from a pre-clinical or clinical placement for reasons which may include:

1. Verifiable health reasons, or the teacher candidate's personal reasons which are acceptable to the Director of Office of Clinical Experiences & Applied Research (OCEAR), Clinical Supervisor, Program Coordinator and Department Chair, as well as the cooperating teacher, principal and/or other school personnel.
2. A classroom setting where the health and safety of the teacher candidate or students in the classroom are at risk.
3. Personal circumstances impacting the teacher candidate's ability to meet the requirements of the pre-clinical or clinical placement.

In the case of a voluntary removal from a pre-clinical or clinical placement the following steps will be taken:

1. When the teacher candidate asks to withdraw from a pre-clinical or clinical assignment, the Director of OCEAR will schedule a conference with the teacher candidate, Program Director or Department Chair and OCEAR Director. Appropriate school personnel and additional university personnel may be present.
 - a. Specific reasons for withdrawal consideration will be presented at the conference by the teacher candidate. The teacher candidate will be presented with a Clinical Placement Alert form completed and signed by the OCEAR Director and/or Department Chair. **Appendix 12** is an example of the Clinical Placement Alert form.
 - b. After the teacher candidate has had the opportunity to be heard, he/she shall be excused from the conference, and the educational professionals shall evaluate the reasons for withdrawal, the documentation thereof, and any responses of the teacher candidate to said reason and documentation.
2. If a professional decision is made to withdraw the teacher candidate from the pre-clinical or clinical assignment, the OCEAR Director shall inform the respective Department Chair, Program Coordinator and/or CEHS Associate Dean. The OCEAR Director and Department Chair, and appropriate additional university personnel will then, in the exercise of their professional judgment and discretion, fill out a Withdrawal Form.
3. In the case of a voluntary withdrawal, the teacher candidate may reapply for placement in a future semester. Any reapplication and placement must be in compliance with the SHU policy for reenrollment. When granted permission to repeat a pre-clinical or clinical experience, the teacher candidate may have an action plan and may also need to comply with any new state, program or college requirements.
4. When a teacher candidate is removed from a pre-clinical or clinical assignment, the OCEAR Director will schedule a meeting to include the teacher candidate, the Director of OCEAR, the Program Coordinator and/or the Department Chair, CEHS Associate Dean or other appropriate University personnel.

5. The Director of OCEAR will send written notice to the cooperating school and the Dean of the College of Education & Human Services of the withdrawal/removal of any teacher candidate for any reason.
6. In either the pre-clinical experience course or the senior seminar, an evaluation of the appropriate grade for the course will be assessed and communicated to the teacher candidate.
7. Voluntary withdrawal from a clinical placement may cause a teacher candidate to forfeit any tuition and fees associated with that clinical placement. If granted permission to retake a clinical placement in a subsequent semester, a teacher candidate will likely be required to pay the tuition and fees associated with the clinical placement again.

The teacher candidate may appeal a withdrawal/termination decision to the College of Education & Human Services Retention Committee.

Involuntary

A teacher candidate may be withdrawn involuntarily, by the university or at the request of the school district, from a pre-clinical or clinical experience for cause shown, including:

1. Certain health conditions (such as pneumonia or pink eye) may require an involuntary withdrawal from the placement. Once the health issue is resolved and cleared with a doctor's note, the teacher candidate may return to the placement.
2. Determination by the school district or university personnel that continued participation in the experience will adversely affect the students served, the teacher candidate, the participating school or agency, or the university.
3. Failure by the teacher candidate to meet the minimum requirements of the experience as determined by the cooperating teacher(s) and/or Clinical Supervisor(s). In this case, the evidence to support the decision should be provided by the Clinical Supervisor(s) with the guidance of the cooperating teacher(s). Documentation of all evaluations, conferences and Clinical Placement Alert Forms must be provided.

The procedures for the removal of a pre-clinical or clinical intern are as follows:

1. In some cases, a teacher candidate may violate a school policy/rule or SHU policy which may result in the teacher candidate being involuntarily and immediately removed the placement. When appropriate school personnel and university staff consider withdrawing a teacher candidate from a pre-clinical or clinical assignment, the Director of OCEAR will schedule a conference with the teacher candidate, Program Director, Department Chair, OCEAR Director and/or CEHS Associate Dean. Appropriate school personnel and additional university personnel may be present.
 - a. Specific reasons for withdrawal consideration will be presented at the conference. The teacher candidate will be presented with a Clinical Placement Alert form completed and signed by the Clinical Supervisor and/or cooperating teacher. The teacher candidate is required to sign the Clinical Placement Alert form irrespective of whether he/she agrees with the assessment. **Appendix 12** is an example of the Clinical Placement Alert form.

- b. The teacher candidate shall be given an opportunity to present information relating to the reasons for withdrawal consideration.
 - c. After the teacher candidate has had the opportunity to be heard, he/she shall be excused from the conference, and the educational professionals shall evaluate the reasons for withdrawal, the documentation thereof, and any responses of the teacher candidate to said reason and documentation.
2. If a professional decision is made to withdraw the teacher candidate from the clinical or student teaching assignment, the OCEAR Director shall inform the respective Department Chair and Program Coordinator. The OCEAR Director and Department Chair, and appropriate additional university personnel will then, in the exercise of their professional judgment and discretion, fill out a Withdrawal Form identifying the reasons and category for withdrawal and providing specific steps to be completed before any future directed teaching assignment can be made.
 - a. 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.
 - b. Probationary: The Director of OCEAR and the Department Chair 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 Coordinator and Department Chair.
 - c. 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. 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.
3. When a teacher candidate is removed from a pre-clinical or clinical assignment, OCEAR Director will schedule a meeting to include: the teacher candidate, the Director of OCEAR, the Program Coordinator and/or the Department Chair and the CEHS Associate Dean. The teacher candidate will be informed of the reasons for withdrawal/removal and the category of withdrawal/removal.
4. The Director of OCEAR will send written notice to the cooperating school and the Dean of the College of Education & Human Services of the withdrawal/removal of any teacher candidate for any reason.
5. In either the pre-clinical experience course or the senior seminar, an evaluation of the appropriate grade for the course will be assessed and communicated to the teacher candidate.
6. A teacher candidate may or may not be granted permission to repeat a pre-clinical or clinical experience. If granted, the teacher candidate will have an action plan and may also need to comply with any new state, program or college requirements.

7. Teacher candidates who are unsuccessful a second time in a pre-clinical or clinical experience will be reviewed for removal from the program. A third attempt to re-enroll will not be permitted.
8. Withdrawal from a clinical placement may cause a teacher candidate to forfeit any tuition and fees associated with that clinical placement. If granted permission to retake a clinical placement in a subsequent semester, a teacher candidate will likely be required to pay the tuition and fees associated with the clinical placement again.

The teacher candidate may appeal a withdrawal/termination decision to the College of Education & Human Services Retention Committee.

Short Term Cooperating Teacher Absence

If a cooperating teacher must be absent on a short term basis (1-5 days), a substitute teacher must be present in the classroom. The clinical intern's responsibilities should include only those which have been previously assigned. The student teacher may observe or assist the substitute teacher.

Social Media Policy

The Department of Educational Studies (EDST) recognizes that social media sites have become important and influential communication channels for engaging and developing relationships. EDST recognizes and embraces the power of social media, and supports use of such communication tools to connect with peers and colleagues.

In a teacher candidate's enthusiasm to make the most out of these tools, be mindful of any legal ramifications that may occur. New legal issues with social networking seem to arise on a weekly, if not daily, basis.

Best Practices for All Social Media Sites, Including Personal Sites:

1. **Do not add any students to your social networks such as Facebook, Instagram or other social networks for any reason as they are minors.** Similarly, do not accept invitations from students (whether in your classes or not) who request to add you to their accounts.
2. **Think twice before posting. Privacy does not exist in the realm of social media.** Consider what could happen if a post becomes widely known and how that may reflect both on the poster and the University. Remember that archival systems such as blogs save information even after the poster has deleted it. If a teacher candidate is uncertain about posting something or responding to a comment, he/she should ask their advisor for input.
3. **Protect confidential and proprietary information.** When posting to a social media site, be sure not to post confidential or proprietary information about SHU students or employees, as well as cooperating teachers and students.
4. **On personal sites, identify your views as your own.** If you identify yourself as a SHU CEHS student, it should be clear that the views expressed are not necessarily those of the University or CEHS.
5. **Strive for accuracy. Make sure your facts are straight** before posting them on social media. Review content for grammatical and spelling errors.
6. **Be respectful.** Understand that content contributed to a social media site may solicit comments or discussions of opposing views. Responses should be considered carefully in light of how they would reflect on the poster and/or the University and its institutional voice.

7. **Remember your audience.** Be aware that a presence in the social media world is or easily can be made available to the public at large. This includes prospective and current students, professors, advisors, supervisors, cooperating teachers and students, family members, etc. Consider this before publishing to ensure the post will not alienate, harm, or provoke any of these groups.
8. **Use of College logos.** Do not use the University's name to promote a product or cause.
9. **Use of photography. Photographs posted on social media sites can easily be reproduced or re-posted by any visitor to a social media site, without permission.** A teacher candidate should always take time to consider the appropriateness of posting a photograph on official and personal accounts. If the picture is not something that he/she would want distributed by others or the media, the candidate may want to reconsider posting the photo. There is no posting of pictures of students from a candidate's clinical placement.
10. **Taking photos and video.** At no time should a teacher candidate take a photograph or video of a student for any reason, either in the classroom, on a field trip or any other interaction. In addition to the image being stored on a smartphone, many devices automatically sync and upload to cloud storage services. The privacy of the students in the classroom is a critical factor in all choices involving social media and photography.

Teacher Candidate as Substitute Teacher

Clinical interns may not serve as substitute teachers while completing hours for their clinical practice. He/she may not serve as a long term or per diem substitute while they are in a mentor relationship in the school. This is a Seton Hall University policy and is intended to protect the cooperating school system and its students as well as the clinical intern. There are no exceptions. Once a clinical intern has completed the NJ state mandated 15-16 weeks of full-time clinical practice, the clinical intern may enter into an employment agreement with the district.

Pre-clinical interns outside of the 60 hours during their clinical experience who have a NJ state certified substitute certificate may substitute teach for a district or school. Clinical interns completing Clinical Practice 1, who have a NJ state certified substitute certificate, may substitute teach for a school or district on days they are not completing placement hours.

Transportation Policy for Clinical Placements

Clinical Interns are responsible for arranging transportation to and from their clinical placements. The clinical placement application seeks information from interns regarding transportation, resident or commuter and individuals to carpool with to assist with placement location and cohort placements.

Indicating that an intern does not have a vehicle, does not guarantee placement within walking distance of the university. Every effort is made to accommodate location and transportation needs of each intern. Interns may need to consider public transportation, carpooling with classmates and/or licensed car services such as Uber and Lyft.

If an intern's resident/commuter status or access to a vehicle changes, the clinical intern is responsible for notifying the Director of OCEAR as soon as possible. If placement has not already been made, it may be possible to accommodate the change with a different placement to meet the changed requirements. A new placement is not guaranteed and, if possible, will be sought after all initial placements are confirmed.

Violation of CEHS Professional Code Policy

The College of Education & Human Services has a Professional Code in place for all students completing teacher education program within the college. The code can be found in the Codes & Standards section of this handbook. Any candidate who is found to violate this Professional Code will meet with the Department Chair, Program Director and Director of OCEAR, if applicable. Examples of violation include but are not limited to forging signatures, lying to schoolteachers or administration, purposefully reporting inaccurate hours, and submitting fabricated student assignments. A review of the violation, using The Separation from Clinical Placement Policy (found in this handbook), will determine whether there will be a continuation of placement, repeating of placement or removal from the placement or program.

Work Stoppage or Union Strike

If a work stoppage occurs in a cooperating school system where student teachers are assigned, it is the policy of Seton Hall University that student teachers be declared non-participants to either party involved. The clinical intern is to immediately notify his/her university supervisor of the situation and will remain away from school on a standby basis during the period of time when the school is closed or during the period of time when the school is declared open without resolve of conflicting issues between the Board of Education and the local Teacher Association.

This policy is declared not to favor one side or the other but to realistically recognize the clinical intern's status as a temporary assignee to the school and non-participant in the negotiation process and to protect all parties in the clinical experience program from conflict and concern.

If the work stoppage is less than 5 days, the clinical intern may remain assigned to the school or district. If the work stoppage extends beyond 5 days, the clinical intern will meet with the program director and OCEAR Director to determine the next steps in the best interest of the candidate, which may include removal from that district, reassignment in that semester or reassignment in the following semester.

CLINICAL PLACEMENT EXPECTATIONS

The following information is intended to provide specific guidance to pre-clinical interns, clinical interns, cooperating teachers and clinical supervisors in relation to clinical placements, expectations, roles, responsibilities and requirements.

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PRE-CLINICAL INTERN OVERVIEW

Pre-clinical interns are teacher candidates completing a clinical experience other than full-time clinical practice/student teaching. This is typically undergraduate students completing a clinical experience in their sophomore and junior years. With few exceptions, these clinical experiences require a minimum of 60 hours in the clinical placement.

Expectations and Responsibilities

Following is an overview of the expectations and responsibilities of pre-clinical interns in a clinical experience:

- Within one week of receiving your placement information from OCEAR, contact your assigned cooperating teacher to introduce yourself and arrange the start date of your clinical experience.
- Carefully read the placement requirements outlined in the placement confirmation email and complete all requirements in accordance with EDST Department Policy and the school district's request in a timely manner so as not to delay the start of the placement. Pay particular attention to any requests for interviews and background checks/fingerprints as these requirements are time sensitive.
- Maintain regular communication with your Clinical Supervisor and seek guidance, clarity, and support, particularly in situations that cause you discomfort or concern.
- Familiarize oneself with the school and school district, including but not limited to, teaching and assessment philosophies, structure, materials, administration, and neighborhood.
- Sign in and out of the building in the school office each day at the time of arrival and departure. If the school does not require this of teachers, you may use the school's Visitor's Book for this purpose. In the event of a question about attendance, written documentation will prevail over one's "word".
- Document your attendance and activities on the pre-clinical intern timesheet and provide it to OCEAR by the midterm and final deadlines in the semester.
- Maintain professional interactions with all staff and students at all times. Be pleasant and courteous to everyone in and outside the school building.
- Develop a full semester plan with the assigned cooperating teacher(s) to assure fulfillment of the clinical course requirements.
- Clarify how each individual wishes to be addressed. Use titles to address all employees and administration (Dr., Ms., Mrs., Mr., Rev., etc.) unless receiving permission to use a first name.
- Recognize that you are a pre-clinical intern assigned to learn from a cooperating teacher who has demonstrated success in the profession. As such, the Cooperating Teacher has the final determination about the content and methodology used within the classroom.
- Engage in professional dialog and discourse to learn the rationale behind a Cooperating Teacher's decisions and actions to help you grow and develop as a reflective professional.
- Have all lesson plans approved by the cooperating teacher for content and methodology before implementing them, and in sufficient time for you to make changes (and be reviewed again) should they be required by the cooperating teacher.
- Be receptive to suggestions and constructive feedback from the cooperating teacher and clinical supervisor.

- Maintain confidentiality with respect to information given by parents and families, faculty, administrators, or supervisors. This includes information derived from student performance, pupil data records, personnel records, or faculty meetings.
- If you are ill and cannot attend your clinical placement site as scheduled, notify your cooperating teacher, school office, OCEAR and, if necessary, clinical supervisor of your absence prior to the start of the school day. Make arrangements to get your lesson plans to your cooperating teacher prior to the start of the school day (for example, send as an email attachment to the cooperating teacher, have someone else drop your lesson plans off at the school, etc.) if you are scheduled to teach that day.
- Demonstrate professional dispositions and demeanor, and dress professionally at all times.
- Attend pre-clinical intern convocation at Seton Hall University.
- Check **Appendices 2, 3, and 4** for program and course requirements associated with your clinical placement. Be sure to communicate the expectations and requirements with your cooperating teacher.

Timesheets

For security purposes, teacher candidates will document attendance at the main office or security desk at the district/school placement upon arrival and departure. Teacher candidates will also maintain a timesheet that documents the dates and times of attendance. This timesheet must be signed by a school administrator or Cooperating Teacher and must document relevant daily activities.

Pre-clinical interns completing a clinical experience or Clinical Practice 1 are required to submit both a midterm and final timesheet. Teacher candidates can access this timesheet on the OCEAR website at <http://blogs.shu.edu/cear>. **Appendix 6** is an example of the pre-clinical intern timesheet. In total, the midterm and final timesheets need to document and verify a minimum of 60 hours in the clinical experience. Each timesheet must be signed by the cooperating teacher on record for the placement.

Evaluation for Pre-Clinical Interns – Observation & Conference Report (O&C)

A clinical supervisor will observe and evaluate a lesson written and taught to K-12 students by the candidate during each clinical experience. The cooperating teacher will also complete a written evaluation and will sign the candidate's schedule of hours of attendance for the semester.

Both the clinical supervisor and cooperating teacher use the Observation & Conference (O&C) Report for evaluating a pre-clinical intern's lesson and time in the clinical experience. **Appendix 10** is a sample of the O&C that both clinical supervisors and cooperating teachers complete electronically. As a pre-clinical intern, it is highly recommended you become familiar with the evaluation instrument early in each placement.

In Spring 2019, OCEAR and the Department of Educational Studies piloted a version of the O&C to be used specifically in Clinical Experience 3 for ESED majors. This version of the O&C is focused specifically on the special education placement for ESED majors. It is based on the Council for Exceptional Children standards for teachers. Currently, it is still in use. This CEC/Clinical Experience 3 version of the O&C can be found as **Appendix 10A**.

The evaluation has a grade scale of Emergent, Novice, Proficient and Advanced Proficient for the observation and lesson. In addition, there is a grade scale for the overall clinical experience.

The grades for the overall clinical experience are: **P** [pass] **PR** [pass with remediation] and **F** [fail]. A grade of P is the goal. An intern who receives a grade of PR from either the cooperating teacher or supervisor is required to attend a conference with the OCEAR director, the department chair and/or the program director to discuss the evaluation and determine a plan for moving forward. If both the cooperating teacher and supervisor submit a grade of PR, the candidate will have the conference in the Office of Clinical Experiences, and receive a remediation plan that may include additional clinical hours, additional supervisor visits and evaluations, and/or additional faculty mentoring. If a candidate receives a grade of F from either the supervisor or cooperation teacher, a conference in the Office of Clinical Experiences will occur and the entire experience must be repeated with agreed upon recommendations if the candidate wants to continue in the teacher preparation program. A candidate who is underperforming in their clinical experience or is not adhering to the Professional Code in more than one instance will be referred to the Retention Committee for a decision on his or her status in the program and possible dismissal.

Clinical Placement Alert Form

If a teacher candidate displays behaviors or performances that suggest she/he is struggling, a cooperating teacher and/or clinical supervisor can submit a Clinical Placement Alert Form. Any submission of a Clinical Placement Alert Form must be preceded by conversations between the cooperating teacher, clinical supervisor and teacher candidate.

It is important to note that a Clinical Placement Alert Form should be submitted as soon as there is a concern the cooperating teacher or clinical supervisor feels has not been addressed by the teacher candidate after prior interventions and conversations. It is in the teacher candidate's best interest to have as much time as possible to address any concerns or work toward improvement.

The Clinical Placement Alert Form is submitted electronically using an online survey tool. The Clinical Placement Alert Form can be found on the Office website at <http://blogs.shu.edu/cear>. **Appendix 12** is a sample of the Clinical Placement Alert Form.

The direct link to access the form in the OCEAR online database is:
https://shu.co1.qualtrics.com/jfe/form/SV_ezzE5BSxpSA2r41.

The Clinical Placement Alert Form is sent to the Director of the Office of Clinical Experiences & Applied Research. Once received and reviewed, the director will work with the cooperating teacher, supervisor, faculty advisor, teacher candidate and other appropriate individuals to develop an intervention and support plan for the teacher candidate. The support plan is developed at a meeting with all parties.

In the event this support plan is not enough, the College has established a Retention Committee.

Retention Committee

CEHS has established a Retention Committee comprised of faculty from the teacher preparation programs as well as from Arts and Sciences, a representative from the Office of Disability Support, and counseling services. The goal of the Retention Committee is to provide support and intervention for candidates who might be struggling in their classes or their field placements due to **academic and/or dispositional issues**. Candidates displaying a consistent pattern of difficulty across courses and/or field settings would be asked to meet with the Retention Committee to establish a plan for change with specific benchmarks and a contact

person to make sure they are provided with the information they need to progress. Only after efforts to remediate a behavior have occurred and no change has taken place would the committee discuss dismissal options from the College.

This committee meets separately and with the teacher candidate to discuss the issues or concerns that are raised regarding a particular candidate and to make decisions as to the remediation and retention or dismissal of a teacher candidate from his or her program.

If a Retention Committee needs to be formed the Associate Dean for Academic Affairs will coordinate the action.

Clinical Experience Placement Survey

Near the conclusion of each clinical experience, pre-clinical interns are required to complete a survey to provide feedback on the placement school, classroom, cooperating teacher and clinical supervisor. The feedback and information gathered from the teacher candidates is used to evaluate the placements, cooperating teachers and clinical supervisors in subsequent semesters.

CLINICAL INTERN OVERVIEW

Clinical interns are teacher candidates completing their full year clinical practice. In order to meet NJDOE state requirements, beginning in the Fall of 2017 in teacher preparation programs, clinical interns are required to complete a full year of clinical practice. This includes one semester of clinical practice two full days a week and one semester of 15-16 weeks of 5 days a week. In most circumstances, this is completed during a Fall/Spring semester combination. However, in some instances a clinical intern may complete the requirement in a Spring/Fall combination.

The semester of two days a week is referred to as Clinical Practice 1. The semester of five days a week is referred to as Clinical Practice 2.

Expectations and Responsibilities

During the clinical practice year, the teacher candidate's main objective is to continue to develop the knowledge, skills, and dispositions to be an effective teacher. Clinical interns should strive to become thoughtful learners, leaders, inquirers, and community members.

Throughout the year, the clinical intern must work on the development of his/her technical competencies and reflective teaching. He or she should also, along with the assistance of the cooperating teacher, gradually assume responsibility for planning, instruction, and management of the classroom to work toward full-time, lead teaching or develop a successful model of co-teaching/co-planning. Designing and implementing lessons and units using a variety of instructional strategies/activities, experiencing one-on-one, small-group and large-group settings, and using a variety of instructional media and resources is a part of the teaching process and should include bringing about an understanding of individual differences relating to race, class, gender, culture, and ability. It is also important to participate in all activities and responsibilities required of the cooperating teacher, such as record keeping, grading, conferences, in-services, faculty meetings, and other non-teaching responsibilities such as class plays, athletic events, musical performances, field trips and other student-centered activities.

Clinical interns need to develop a receptive attitude toward suggestions and criticisms. Constructive feedback from the cooperating teacher and clinical supervisor is essential for growth as a professional. Also, clinical interns should not be afraid to ask for advice or suggestions from their cooperating teacher and clinical supervisor. Setting up regular meetings with the cooperating teacher to discuss concerns, plans, and progress is one way to keep the communication lines open. Clinical interns should notify the clinical supervisor of any changes in their schedule and submit them written lesson plans for each lesson observed.

Appendix 13 provides an overview of expectations of clinical interns during clinical practice.

Appendix 14 provides an overview of questions a clinical intern should consider asking at the beginning of the placement and addressing throughout their clinical practice placement.

Appendix 24 is a series of four alignment charts for each of the programs of study – Elementary Education, Secondary/Special Education, CEAS Elementary Education and CEAS Secondary Education. These charts provide an overview of courses, requirements and expectations for both the Clinical Practice I and Clinical Practice II semesters. These are a great resource for teacher candidates, cooperating teachers and clinical supervisors.

Guide to Week-to-Week Activities for 15 Weeks of Clinical Practice

Historically, the model of a clinical intern over the 15 week semester has been a gradual acquisition by the clinical intern of lessons and subject areas over the first part of the semester, full teaching by the teacher candidate followed by a gradual return of content to the cooperating teacher.

Appendix 15 is a guide to week-to-week activities for the 15 week full-time clinical practice semester.

Co-Teaching Models

In recent years, many cooperating teachers and teacher candidates have adopted a co-planning/co-teaching model for clinical practice. Dr. Marilyn Friend is considered to be a leader in the field of co-teaching. Her center and additional information on co-teaching can be found here - <https://coteach.com/>. The six approaches to co-teaching she presents can be found on her website at <http://www.marilynfriend.com/approaches.htm>. **Appendix 16** provides an overview of Dr. Friend's six models to co-teaching. **Appendix 17** provides a suggested timeline for co-teaching throughout clinical practice.

An additional resource for how classrooms can be structured for the six models of co-teaching can be found here, <https://www.edutopia.org/article/how-choose-co-teaching-model>.

St. Cloud University has an Academy for Co-Teaching & Collaboration. There are a number of valuable resources available including access to articles written about, 'Changing the Face of Student Teaching Through Co-teaching'. The Academy and its resources are available here: <https://www.stcloudstate.edu/coeld/coteaching/default.aspx>.

Clinical Practice/Senior Seminar

Teacher candidates completing their clinical practice are required to register for and complete the requirements for Senior Seminar (EDST 4001, EDST 4500, EDST 6426). In addition to other course requirements, the process of competing edTPA will be incorporated into this course.

edTPA

edTPA: The New Jersey Department of Education has selected edTPA, created by SCALE (Stanford [University] Center for Assessment, Learning and Equity) as the required performance assessment for all teacher candidates.

edTPA is a subject-specific performance assessment (27 different teaching field versions exist) it focuses on three key areas: (i) planning; (ii) instruction (video component), and (iii) assessment.

In 2018-2019, NJDOE extended the policy for 2017-18; all teacher candidates are required to submit their edTPA scores as part of their certification requirements. There is no minimal cut off score associated with this academic year.

Starting in AY 2019-2020 until updated, all teacher candidates must meet the minimum scores set by the New Jersey Department of Education: The required minimum scores current scores are:

- 37 for 15 rubric handbooks (most Secondary Education content areas)
- 32 for 13 rubric handbooks (World Language and Classical Language)
- 44 for 18 rubric handbooks (Elementary Education)

The requirements and process for completing the edTPA will be incorporated into your upper level methods courses and culminating seminar course (EDST 4001, EDST 4500, EDST 6426). Chalk and Wire, our electronic data and assessment system, will serve as the secure tool to collect and prepare your work for the final submission of edTPA to the external evaluating system through Pearson.

For more information regarding the specifics of the edTPA, please visit the NJDOE site <http://www.nj.gov/education/educators/rpr/preparation/assessment/>.

Evaluation for Clinical Interns – Observation & Conference Report (O&C) & Clinical Competency Inventory (CCI)

Observation & Conference Report (O&C)

Appendix 10 is a sample of the O&C evaluation report.

In Clinical Practice 1 and 2, the clinical supervisor uses the Observation & Conference Report (O&C) instrument as a benchmark for evaluating the clinical intern's performance and progress throughout clinical practice. During Clinical Practice 1, the clinical supervisor observes the teacher candidate three times using the O&C. Each observation/evaluation should be followed by a conference between the teacher candidate, clinical supervisor and cooperating teacher.

The cooperating teacher completes two O&C reports during Clinical Practice 1. The evaluation grades from the clinical supervisor and cooperating teacher determine the grade for the clinical experience course (EDST 2800 for undergraduate candidates or EDST 6334 for graduate candidates).

The grades for Clinical Practice 1 are: **P** [pass] **PR** [pass with remediation] and **F** [fail]. A grade of P is the goal. A clinical intern who receives a grade of PR from either the cooperating teacher or supervisor is required to attend a conference with the OCEAR director, the department chair and/or the program director to discuss the evaluation and determine a plan for moving forward. If both the cooperating teacher and supervisor submit a grade of PR, the candidate will have the conference in the Office of Clinical Experiences, and receive a remediation plan that may include additional clinical hours, additional supervisor visits and evaluations, and/or additional faculty mentoring. If a candidate receives a grade of F from either the supervisor or cooperation teacher, a conference in the Office of Clinical Experiences will occur and the entire experience must be repeated with agreed upon recommendations if the candidate wants to continue in the teacher preparation program. A candidate who is underperforming in their clinical experience or is not adhering to the Professional Code in more than one instance will be referred to the Retention Committee for a decision on his or her status in the program and possible dismissal. The teacher candidate may be determined ineligible to continue onto Clinical Practice 2.

During Clinical Practice 2, only the Clinical Supervisor uses the O&C report for evaluation and observations. The teacher candidate is observed 7 times throughout Clinical Practice 2. The Clinical Supervisor uses the O&C at observations 1, 2, 3, 5 and 6. As the O&C is closely aligned with the Clinical Competency Inventory (CCI), the scores and feedback provided by the Clinical Supervisor should be formative and do not impact the final senior seminar grade for a teacher candidate.

Clinical Competency Inventory (CCI)

Appendix 11 is an example of the CCI evaluation instrument.

The Clinical Competency Inventory (CCI) is used by both the Clinical Supervisor and Cooperating Teacher during Clinical Practice 2 at both the midterm (4th observation) and final (7th observation).

The CCI has been designed to provide feedback on the progress of individual teaching candidates who are completing their clinical practice experience in their teacher preparation program. This performance-based assessment instrument measures key competencies aligned to the 2011 InTASC standards and the edTPA rubrics that are required of all teaching candidates prior to being recommended for certification. The CCI specifies the defining set of competencies that pre-service teachers should demonstrate before being recommended for certification in the State of New Jersey.

Some competencies may not be observable and usually start with the phrase, “Provides evidence of.” It is expected that the candidate will bring evidence of these competencies to a conference. It is the teaching candidate’s responsibility to bring a professional portfolio and additional artifacts to the final assessment conference.

The CCI is to be used as a formative assessment at the midterm evaluation and a summative assessment at the completion of the clinical practice experience, during the last observation. It should be used in conjunction with the O&C that is aligned with the CCI and focuses on the quality of the specific lesson being observed. The CCI is meant to be a cumulative assessment of competencies that the supervisor and cooperating teacher have observed throughout the clinical practice. The CCI should be introduced at the beginning of the clinical practice to guide the development of the teaching candidate and to provide feedback on the candidate’s strengths and areas of improvement.

The procedure for using the CCI is as follows:

1. At the first visit, the supervisor will review the O&C and the CCI with the cooperating teacher.
2. At mid-term, the clinical supervisor and cooperating teacher fill in the CCI independently.
3. The supervisor will hold a mid-point conference with the teaching candidate to go over the CCI. The cooperating teacher will join this conference to discuss mid-point assessment.
4. At the completion of the clinical placement, the clinical supervisor and cooperating teacher fill in the CCI independently and submit the final assessment.
5. At the completion of the clinical practice, the teaching candidate will do a self-assessment/reflection and fill in the CCI.

Please note that the rating of Not Observed cannot be used for the Final Assessment. If a Clinical Supervisor or Cooperating Teacher did not observe a specific indicator in the classroom at the midterm, the midterm conference should have provided guidance to the teacher candidate on how he or she can demonstrate competency in that standard by the final evaluation. If you have a question or reservation about an indicator, please insert a comment explaining your concerns.

At the final (7th) observation, the Clinical Supervisor and Cooperating Teacher must rate all 34 indicators. A teaching candidate needs a 3.0 average, a total of at least 102 points, to be recommended for certification. In addition to being used for recommendation for certification, **please note the Clinical Supervisor and Cooperating Teacher final evaluation grades are factored into the teacher candidate’s grade for senior seminar.**

Timesheet

For security purposes, teacher candidates will document attendance at the main office or security desk at the district/school placement upon arrival and departure. Teacher candidates will also maintain a timesheet that documents the dates and times of attendance. This timesheet must be signed by a school administrator or Cooperating Teacher and must document relevant daily activities.

Clinical Interns completing Clinical Practice 1 (two day a week semester) are required to submit both a midterm and final timesheet. Teacher candidates can access this timesheet on the OCEAR website at <http://blogs.shu.edu/cear>. **Appendix 6** is an example of the pre-clinical intern/clinical practice 1 timesheet. The Clinical Practice 1 timesheet needs to document two full days a week. During the Clinical Practice 2 semester (semester of 5 day a week) are required to submit only a final timesheet. Teacher candidates can access this timesheet on the OCEAR website at <http://blogs.shu.edu/cear>. **Appendix 7** is an example of the Clinical Intern/Clinical Practice 2 timesheet. Each timesheet must be signed by the cooperating teacher for the placement.

Clinical Intern Completed Surveys

Near the completion of clinical practice, clinical interns are required to complete the following surveys to provide feedback to the programs for improvement and focus.

CCI Self-Reflection/Evaluation

Clinical interns complete the same CCI instrument used at the mid-term and final by the cooperating teacher and clinical supervisor. Clinical interns use the instrument as a way to reflect on their placement, skills and knowledge.

Clinical Placement Evaluation

Near the conclusion of clinical practice, clinical interns are required to complete a survey to provide feedback on the placement school, classroom, cooperating teacher and clinical supervisor. The feedback and information gathered from the teacher candidates is used to evaluate the placements, cooperating teachers and clinical supervisors for subsequent semesters.

Exit Survey

During the final semester of a teacher candidate's program, he or she is required to complete an Exit Survey. This survey provides the candidate an opportunity to provide feedback on their entire program within the College of Education & Human Services (CEHS) and support received from institution support services such as the library and information technology. CEHS uses the data collected from these surveys to continuously evaluate and improve the programs.

Clinical Placement Alert Form

If a clinical intern displays behaviors or performances that suggest she/he is struggling, a cooperating teacher and/or clinical supervisor can submit a Clinical Placement Alert Form. Any submission of a Clinical Placement Alert Form must be preceded by conversations between the cooperating teacher, clinical supervisor and teacher candidate.

It is important to note that a Clinical Placement Alert Form should be submitted as soon as there is a concern the cooperating teacher or clinical supervisor feels needs to be addressed. However, the cooperating teacher and supervisor should have already discussed the concerns

with the teacher candidate. It is in the teacher candidate's best interest to have as much time as possible to address any concerns or work toward improvement.

The Clinical Placement Alert Form is submitted electronically using an online survey tool. The Clinical Placement Alert Form can be found on the Office website at <http://blogs.shu.edu/cear>. **Appendix 12** is a sample of the Clinical Placement Alert Form.

The direct link to access the form in the OCEAR online database is:
https://shu.co1.qualtrics.com/jfe/form/SV_ezzE5BSxpSA2r41.

The Clinical Placement Alert Form is sent to the Director of the Office of Clinical Experiences & Applied Research. Once received and reviewed, the director will work with the cooperating teacher, supervisor, faculty adviser, teacher candidate and other appropriate individuals to develop an intervention and support plan for the teacher candidate.

In the event this support plan is not enough, the College has established a Retention Committee.

Retention Committee

CEHS has established a Retention Committee comprised of faculty from the teacher preparation programs as well as from Arts and Sciences, a representative from the Office of Disability Support, and counseling services. The goal of the Retention Committee is to provide support and intervention for candidates who might be struggling in their classes or their field placements due to **academic and/or dispositional issues**. Candidates displaying a consistent pattern of difficulty across courses and/or field settings would be asked to meet with the Retention Committee to establish a plan for change with specific benchmarks and a contact person to make sure they are provided with the information they need to progress. Only after efforts to remediate a behavior have occurred and no change has taken place would the committee discuss dismissal options from the College.

This committee meets separately and with the teacher candidate to discuss the issues or concerns that are raised regarding a particular candidate and to make decisions as to the remediation and retention or dismissal of a teacher candidate from his or her program.

If a Retention Committee needs to be formed the Associate Dean for Academic Affairs within the College of Education & Human Services will coordinate the action.

COOPERATING TEACHER OVERVIEW

As a licensed classroom teacher accepting one of SHU's teacher candidates, a teacher is considered a cooperating teacher. Whether the teacher candidate is in your classroom for a 60 hour pre-clinical observation or the full year clinical practice, a lead classroom teacher is a cooperating teacher to our teacher candidate. While the level of commitment and expectations will vary, every cooperating teacher is required to complete an evaluation for the teacher candidate and every cooperating teacher must approve timesheets for the teacher candidate.

The cooperating teacher is an important part of the clinical experience triad and plays a key role in the pre-clinical and clinical experience because she/he works closest with the teacher candidate. To receive the greatest benefits from this relationship, a mutual feeling of respect and understanding must exist. It is important for the cooperating teacher to accept the teacher candidate as a co-worker and convey that acceptance to both their students and colleagues. The cooperating teacher should also demonstrate professional conduct and provide an effective role model in all aspects of teaching.

At the beginning of the semester, the pre-clinical or clinical intern, cooperating teacher, and clinical supervisor will meet to develop written expectations for the clinical placement, which are acceptable to all three members of the triad.

In the clinical practice placement, the cooperating teacher and clinical intern will meet on a regular basis throughout the semester to: 1) monitor progress in meeting the expectations, 2) assess the teacher candidate's understanding of utilization of the district curriculum, 3) assess the student's understanding and development of the district's expectations for teachers, 4) review written assessments of the teacher candidate's teaching, based on the expectations, 5) clarify other teacher-clinical intern responsibilities.

Initially, the clinical intern may feel anxious and have many questions about their respective clinical experience. (**Appendix 14** provides a list of questions clinical interns are encouraged to discuss with cooperating teachers.) The cooperating teacher can help the student feel more at ease and accepted by providing the teacher candidate with a desk or work space, an assembled packet of school and classroom procedures and policies, and familiarizing him/her with the administrators, faculty, support staff, curriculum programs, and available resources.

It is important to involve the pre-clinical or clinical intern in some classroom activities early in his/her experience even if these activities are somewhat limited in terms of responsibility. The cooperating teacher can begin by setting aside time to discuss a cooperative plan for the semester. This planning time is useful in identifying performance expectations for both the teacher candidate and the cooperating teacher.

The preparation of our teacher candidates would not be possible without the mentorship, time and commitment of our cooperating teachers. We are grateful for your partnership and commitment to the profession of education.

Expectations

Appendix 18 is an outline of the Role of the Cooperating Teacher. It provides an overview of expectations cooperating teachers of both pre-clinical and clinical interns. Please refer to that information for general requirements and expectations. The following information addresses the specific forms and evaluations required to be completed by cooperating teachers.

Pre-Clinical Intern

As a cooperating teacher of a pre-clinical intern, the teacher candidate will be in the classroom for a minimum of 60 hours. The course requirements and expectations associated with each teacher candidate depends on the major and the clinical experience the teacher candidate is completing.

Appendices 2, 3, 4 and 5 are an overview of the program requirements and an outline of the course requirements linked to each clinical experience.

As a cooperating teacher, you are asked to complete the following documentation for a pre-clinical intern:

1. Verify and sign the pre-clinical intern's midterm and final timesheets.
2. Complete the online Observation & Conference Report (O&C) evaluation **once** for the pre-clinical intern.

Clinical Intern

Appendices 16, 17, and 18 are excellent resources to help guide, prepare and open dialogue with your clinical intern.

Appendix 24 is a series of four alignment charts for each of the programs of study – Elementary Education, Secondary/Special Education, CEAS Elementary Education and CEAS Secondary Education. These charts provide an overview of courses, requirements and expectations for both the Clinical Practice I and Clinical Practice II semesters. These are a great resource for teacher candidates, cooperating teachers and clinical supervisors.

Throughout the clinical practice year, the clinical intern will be seeking guidance and mentorship from the cooperating teacher. A clinical intern completing their clinical practice will likely be with the cooperating teacher for a full year. In most cases, the year will be a Fall/Spring semester combination where the clinical intern is in the classroom for two days a week in the fall and five days a week for 15 weeks in the spring semester. In some instances, a clinical intern may complete these hours in a Spring/Fall combination, where the spring semester is two days a week and the fall semester is five day a week for 15 weeks.

As a cooperating teacher, you are asked to complete the following documentation for a clinical intern:

1. Verify and sign the pre-clinical intern's midterm and final timesheets.
2. Complete the online Observation & Conference Report (O&C) evaluation **twice** during the Clinical Practice 1 semester.
3. Complete the Clinical Competency Inventory (**CCI**) **evaluation at the midterm (4th observation) and final (7th observation)** for the Clinical Practice 2 semester.
4. Submit required paperwork for Seton Hall University in order to receive the Honorarium payment for mentoring a clinical intern.

Evaluation Instruments & Training*Pre-Clinical Intern*

Cooperating teachers are required to complete one evaluation for pre-clinical interns using the Observation & Conference Report (O&C).

Appendix 10 is an example of the O&C evaluation instrument. Cooperating teachers are encouraged to review the instrument with the teacher candidate early in the semester to ensure a common understanding of expectations and standards.

In Spring 2019, OCEAR and the Department of Educational Studies piloted a version of the O&C to be used specifically in Clinical Experience 3 for ESED majors. This version of the O&C is focused specifically on the special education placement for ESED majors. It is based on the Council for Exceptional Children standards for teachers. Currently, it is still in use. This CEC/Clinical Experience 3 version of the O&C can be found as **Appendix 10A**.

OCEAR has developed an online training module and assessment on the O&C instrument. Cooperating teachers who are mentoring a teacher candidate for the first time are required to review the training module and complete the assessment. The O&C training and assessment are posted on the office website at <http://blogs.shu.edu/cear>.

Cooperating teachers will receive an email with a link to the online O&C instrument. Any evaluation completed by a cooperating teacher should be completed electronically. If a cooperating teacher does not receive the email and link(s) or has difficulty accessing or completing the O&C evaluation(s), please contact OCEAR at 973-761-9347 or at cehsfieldoffice@shu.edu.

Clinical Intern

Cooperating teachers are required to use both of the SHU evaluation instruments over the course of a clinical intern's full year clinical practice. During the first semester of two days a week, Clinical Practice 1, the cooperating teacher is asked to use the Observation & Conference Report (O&C) twice as an evaluation instrument. During the second semester of five days a week, Clinical Practice 2, the cooperating teacher is asked to use the Clinical Competency Inventory (CCI) at the midterm (4th observation by clinical supervisor) and the final (7th observation by clinical supervisor).

Appendix 10 is an example of the O&C evaluation instrument. **Appendix 11** is an example of the CCI evaluation instrument. Cooperating teachers are encouraged to review the instruments with the teacher candidate early in the semester to ensure a common understanding of expectations and standards.

OCEAR has developed online training modules and assessments on the O&C and CCI instruments. Cooperating teachers who are mentoring a teacher candidate for the first time are required to review the training module and complete the assessment. The O&C and CCI training and assessments are posted on the office website at <http://blogs.shu.edu/cear>.

The CCI has been designed to provide feedback on the progress of individual teaching candidates who are completing their clinical practice experience in their teacher preparation program. This performance-based assessment instrument measures key competencies aligned to the 2011 InTASC standards and the edTPA rubrics that are required of all teaching candidates prior to being recommended for certification. The CCI specifies the defining set of competencies that pre-service teachers should demonstrate before being recommended for certification in the State of New Jersey.

Some competencies may not be observable and usually start with the phrase, "Provides evidence of." It is expected that the candidate will bring evidence of these competencies to a

conference. It is the teaching candidate's responsibility to bring a professional portfolio and additional artifacts to the final assessment conference.

The CCI is to be used as a formative assessment at the midterm evaluation and a summative assessment at the completion of the clinical practice experience, during the last observation. It should be used in conjunction with the O&C that is aligned with the CCI and focuses on the quality of the specific lesson being observed. The CCI is meant to be a cumulative assessment of competencies that the supervisor and cooperating teacher have observed throughout the clinical practice. The CCI should be introduced at the beginning of the clinical practice to guide the development of the teaching candidate and to provide feedback on the candidate's strengths and areas of improvement.

The procedure for using the CCI is as follows:

1. At the first visit, the supervisor will review the O&C and the CCI with the cooperating teacher.
2. At mid-term, the clinical supervisor and cooperating teacher fill in the CCI independently.
3. The supervisor will hold a mid-point conference with the teaching candidate to go over the CCI. The cooperating teacher will join this conference to discuss mid-point assessment.
4. At the completion of the clinical placement, the clinical supervisor and cooperating teacher complete the CCI independently and submit the final assessment.
5. At the completion of the clinical practice, the teaching candidate will do a self-assessment/reflection and fill in the CCI.

Please note that the rating of Not Observed cannot be used for the Final Assessment. If a Clinical Supervisor or Cooperating Teacher did not observe a specific indicator in the classroom at the midterm, the midterm conference should have provided guidance to the teacher candidate on how he or she can demonstrate competency in that standard by the final evaluation. If you have a question or reservation about an indicator, please insert a comment explaining your concerns.

At the final (7th) observation, the Clinical Supervisor and Cooperating Teacher must rate all 34 indicators. A teaching candidate needs a 3.0 average, a total of at least 102 points, to be recommended for certification. In addition to being used for recommendation for certification, **please note the Clinical Supervisor and Cooperating Teacher final evaluation grades are factored into the teacher candidate's grade for senior seminar.**

Cooperating teachers will receive an email with a link to the online O&C and CCI instruments. Any evaluation completed by a cooperating teacher should be completed electronically. If a cooperating teacher does not receive the email and link(s) or has difficulty accessing or completing the O&C and CCI evaluations, please contact OCEAR at 973-761-9347 or at cehsfieldoffice@shu.edu.

Cooperating Teacher Checklist

Appendix 19 is a one page document designed as a checklist for the cooperating teachers. The checklist is designed as an overview and outline for some of the specific requirements for the semester. It does not include any of the general expectations and responsibilities of the cooperating teacher.

Appendix 18 provides additional information and guidance on the Role of the Cooperating Teacher.

Evaluation of Clinical Supervisor

As part of OCEAR's efforts for continuous improvement, we are asking cooperating teachers to complete a brief evaluation instrument assessing the clinical supervisor assigned to the teacher candidate in the classroom. The instrument is focused on the clinical supervisor's support and interactions with the teacher candidate and the cooperating teacher. **Only cooperating teachers of clinical interns in the full-year clinical practice are asked to complete this evaluation.**

Appendix 20 is an example of the Cooperating Teacher Evaluation of Clinical Supervisors in Clinical Practice.

Cooperating teachers will receive an email with a link to the online evaluation instrument. Any evaluation completed by a cooperating teacher should be completed electronically. If a cooperating teacher does not receive the email and link(s) or has difficulty accessing or completing the evaluation(s), please contact OCEAR at 973-761-9347 or at cehsfieldoffice@shu.edu.

Clinical Placement Alert Form

If a teacher candidate displays behaviors or performances that suggest she/he is struggling, a cooperating teacher and/or clinical supervisor can submit a Clinical Placement Alert Form. Any submission of a Clinical Placement Alert Form must be preceded by conversations between the cooperating teacher, clinical supervisor and teacher candidate.

It is important to note that an Alert Form should be submitted as soon as there is a concern the cooperating teacher or clinical supervisor feels needs to be addressed. However, the cooperating teacher and supervisor should have already discussed the concerns with the teacher candidate. It is in the teacher candidate's best interest to have as much time as possible to address any concerns or work toward improvement.

The direct link to access the form in the CEHS online database is:
https://shucehs.co1.qualtrics.com/jfe/form/SV_ezzE5BSxpSA2r41.

The Clinical Placement Alert Form can be submitted electronically using an online survey tool. The form can be found on the Office website at <http://blogs.shu.edu/cear>. **Appendix 12** is a sample of the Clinical Placement Alert Form.

The Clinical Placement Alert Form is sent to the Director of the Office of Clinical Experiences & Applied Research. Once received and reviewed, the director will work with the cooperating teacher, supervisor, faculty adviser, teacher candidate and other appropriate individuals to develop an intervention and support plan for the teacher candidate.

In the event this support plan is not enough, the College has established a Retention Committee. Please see the detailed information on the Retention Committee in the pre-clinical or clinical intern sections of this handbook.

Professional Development Hours & Honorarium

Cooperating teachers of pre-clinical interns are recognized with **3 professional development hours**. Pre-clinical cooperating teachers do not need to submit any paperwork in order to

receive the professional development certificate. OCEAR will email the certificate to a cooperating teacher once we verify signed timesheets and the O&C evaluation for the pre-clinical intern have been submitted.

Cooperating teachers of clinical interns completing year-long clinical practice receive an honorarium of \$300 for their work throughout the year in addition to **25 professional development hours; 5 hours for the Clinical Practice 1 semester and 20 hours for the Clinical Practice 2 semester**. If a cooperating teacher only mentors a clinical intern for one semester or more than one cooperating teacher mentors a candidate, the honorarium will be split accordingly. In order to receive payment, cooperating teachers must complete a W-9 and the Honorarium Request Form. These forms can be found on the OCEAR website at <http://blogs.shu.edu/cear/2016/07/07/honorarium-requirements/>. Payment of an honorarium cannot be made until these forms are received from cooperating teachers. Please note the following dates for paperwork submission and payment.

Paperwork Received By	Processed for Payment
December 1 st	By January 31 st
May 31 st	By June 30 th
After May 31 st	During summer months based on FY end processing dates

Cooperating Teacher Qualifications

Cooperating Teachers mentor clinical interns on a daily basis throughout a clinical practice placement and pre-clinical interns for 60 hours during a clinical experience placement. Cooperating teachers must:

- Hold a teaching certificate in the same area being pursued by the clinical intern or pre-clinical intern.
- Have taught for three years with at least one year of experience in the current school system.
- Have tenure, or the equivalent, in the school district, if mentoring a clinical intern.
- Have the approval of their school building principal and school district.

CLINICAL SUPERVISOR OVERVIEW

The Clinical Supervisor of pre-clinical and clinical interns is an important member of the clinical experience triad because he or she is an official representative of the university and is also responsible for the direct supervision of the teacher candidate. The clinical supervisor also serves as a liaison between the College of Education & Human Services (CEHS) and the personnel of cooperating schools. The clinical supervisor aids in the education of the teacher candidate by making sure that he or she is a thoughtful learner, leader and community member.

The **pre-clinical intern supervisor** must observe each pre-clinical intern for a minimum of one full lesson, one time during the semester. The observation should be preceded by communication with the pre-clinical intern, distribution of the lesson being taught and an understanding of the classroom and school demographics to provide context for the lesson, learner needs, cooperating teacher and classroom guidelines and limitations. The actual observation should be followed by a post-observation conference. The clinical supervisor will complete the online Observation & Conference Report (O&C) evaluation following the observation and ensure a copy of the completed evaluation is provided to the pre-clinical intern and the cooperating teacher. The clinical supervisor will conduct the observation and complete the O&C evaluation prior to the communicated deadlines provided by OCEAR at the beginning of the semester.

The **clinical intern supervisor** must observe each clinical intern in Clinical Practice 1 for a minimum of one full lesson, three times during the semester for a total of three observations. The first observation should be preceded by communication with the clinical intern to include an understanding of the classroom and school demographics to provide context for the lesson, learner needs, cooperating teacher and classroom guidelines and limitations. The clinical intern should provide a lesson plan to the clinical supervisor prior to each observation. The actual observations should be followed by post-observation conferences. The clinical supervisor will complete the online Observation & Conference Report (O&C) evaluation following each of the observations and ensure a copy of the completed evaluation is provided to the pre-clinical intern and the cooperating teacher. The clinical supervisor will conduct the observations and complete the O&C evaluations prior to the communicated deadlines provided by OCEAR at the beginning of the semester.

The **clinical intern supervisor** must observe each clinical intern in Clinical Practice 2 for a minimum of one full lesson, seven times during the semester for a total of seven observations. If the clinical intern has a change in setting, cooperating teacher or students, the first observation should be preceded by communication with the clinical intern to include an understanding of the classroom and school demographics to provide context for the lesson, learner needs, cooperating teacher and classroom guidelines and limitations. The clinical intern should provide a lesson plan to the clinical supervisor prior to each observation. In the Elementary Education program, candidates must be observed at least once in each of the following; Math, Language Arts, Science and Social Studies.

The clinical supervisor will complete the online **Observation & Conference Report (O&C) evaluation following five (observations 1, 2, 3, 5 and 6)** observations and ensure a copy of the completed evaluation is provided to the pre-clinical intern and the cooperating teacher. During the **4th (midterm) and 7th (final) observations**, the clinical supervisor will complete the online **Clinical Competency Inventory (CCI) evaluation**. **Evaluations must be completed and submitted to OCEAR and the teacher candidate within 72 hours of each observation.** The clinical supervisor will conduct the observations and complete the O&C and CCI

evaluations prior to the communicated deadlines provided by OCEAR at the beginning of the semester.

The clinical intern supervisor will conduct a minimum of two evaluation conferences (midterm and final) with the clinical intern and cooperating teacher in attendance. The conferences will include the analysis of performance of the clinical intern, allow for discussion of both strengths and areas for improvement and provide an opportunity for the clinical intern to reflect on his/her own performance. An evaluation conference may occur (if feasible) on the same day that an observation has been conducted.

The clinical supervisor additionally serves as an intermediary, eliminating misunderstandings and resolving conflict between the cooperating teacher and the teacher candidate. He/she should consult with the cooperating teacher regularly regarding the teacher candidate's performance. He/she is also responsible for helping the clinical student or student teacher in his/her development of technical management competencies and reflective teaching and should offer support in practical and theoretical work by considering short and long-term professional needs. She/he should be readily available to the teacher candidate and cooperating teachers for discussion of the candidate's teaching experience. Any problems which may arise during the pre-clinical or clinical intern process should be reported to the Director of the Office of Clinical Experiences & Applied Research.

Finally, the clinical supervisor is an employee of CEHS. As such, the clinical supervisor is required to attend all supervisor meetings, trainings and pre-clinical and clinical convocations for which they have assigned teacher candidates. The inability to attend such meetings may result in withdrawal of assigned teacher candidates for that semester.

Expectations

Appendix 21 is an outline of the Role of the Clinical Supervisor. It provides an overview of expectations for clinical supervisors of both pre-clinical and clinical interns. Please refer to that information for general requirements and expectations. The following information addresses the specific forms and evaluations required to be completed by clinical supervisors.

Pre-Clinical Intern

As a clinical supervisor of a pre-clinical intern, please note that the teacher candidate will be in the classroom for a minimum of 60 hours. The course requirements and expectations associated with each teacher candidate depends on the major and the clinical experience the teacher candidate is completing.

Appendices 2, 3, 4 and 5 are an overview of the program requirements and an outline of the course requirements linked to each clinical experience. Any specific requirements regarding lessons observed are identified in these program requirement charts.

As a clinical supervisor, you are asked to complete the following documentation for a pre-clinical intern:

1. Complete the online Observation & Conference Report (O&C) evaluation for the pre-clinical intern.

Clinical Intern

Appendix 24 is a series of four alignment charts for each of the programs of study – Elementary Education, Secondary/Special Education, CEAS Elementary Education and CEAS Secondary Education. These charts provide an overview of courses, requirements and

expectations for both the Clinical Practice I and Clinical Practice II semesters. These are a great resource for teacher candidates, cooperating teachers and clinical supervisors.

Throughout the clinical practice year, the clinical intern will be seeking guidance and mentorship from both the cooperating teacher and clinical supervisor. A clinical intern completing their clinical practice will be with the cooperating teacher for a full year. In most cases, the year will be a Fall/Spring semester combination where the clinical intern is in the classroom for two days a week in the fall and five days a week for 15 weeks in the spring semester. In some instances, a clinical intern may complete these hours in a Spring/Fall combination, where the spring semester is two days a week and the fall semester is the five day a week for 15 weeks. OCEAR asks a clinical supervisor to commit to the full year of supervision for the clinical intern.

As a clinical supervisor, you are asked to complete the following documentation for a clinical intern:

1. Complete **three** online Observation & Conference Report (O&C) evaluations for the Clinical Practice 1 semester.
2. Complete **five** online Observation & Conference Report (O&C) evaluations for the Clinical Practice 2 semester at observations 1, 2, 3, 5 and 6.
3. Complete the Clinical Competency Inventory (CCI) evaluation at the midterm (4th observation) and final (7th observation) for the Clinical Practice 2 semester.

Pre-Clinical Communication Timeline Suggestions

As the evaluation for pre-clinical interns typically takes place near the later part of the semester, feeling connected and communicating with the pre-clinical intern may seem like a challenge. Following is a possible outline of timing and communication with a pre-clinical intern during a semester.

Type/Method of Communication	Time Frame	Suggestions of Topics and Questions
Convocation Meeting	beginning of semester	share and/or confirm contact information for you, intern and cooperating teacher, share your expectations for communicating and feedback and best way to communicate with them, discuss your mentor style and teaching philosophy, ask about intern goals for the semester, discuss diversity placement data and possible impact on class and students
Email/Call/Teams Meeting	late September/first week of October	Provide any resources, links, books etc that support their goals for the semester, seek their feedback on any challenges or 'wins' they have or are experiencing in the classroom or with their cooperating teacher, confirm they've shared their goals with their cooperating teacher, discuss classroom management techniques, begin discussing lesson details and observation schedules
Email/Call/Teams Meeting	Late October/first week of November	Finalize schedule of observation, discuss observation/evaluation process and your approach to feedback and lesson plan documentation timing, answer any of their questions, follow up on their goals and progress, gain their insights into things they are experiencing and witnessing outside of content delivery (classroom management, DEI work, SEL work, work with other specialists or teachers in the building), encourage them to think outside of the 4 walls of the classroom

Observation	Late November/first week of December	Review and provide feedback and guidance prior to the observation, remind them to seek feedback from the classroom teacher in terms of context and suggestions, Conduct a post observation conference (ideally with you, intern and cooperating teacher), seek their thoughts first, provide feedback on strengths and opportunities for growth, remind them they will receive email with the formal evaluation, complete the evaluation within 72 hours of the observation
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Evaluation Instruments & Training

Pre-Clinical Intern

Clinical supervisors are required to complete one evaluation for pre-clinical interns using the Observation & Conference Report (O&C).

Appendix 10 is an example of the O&C evaluation instrument. Clinical supervisors are required to review the instrument with the teacher candidate early in the semester to ensure a common understanding of expectations and standards.

In Spring 2019, OCEAR and the Department of Educational Studies piloted a version of the O&C to be used specifically in Clinical Experience 3 for ESED majors. This version of the O&C is focused specifically on the special education placement for ESED majors. It is based on the Council for Exceptional Children standards for teachers. Currently, it is still in use. This CEC/Clinical Experience 3 version of the O&C can be found as **Appendix 10A**.

OCEAR has developed an online training module and assessment on the O&C instrument. Clinical supervisors who are working with a pre-clinical intern for the first time, are new hires as an OCEAR clinical supervisor or need to review the instrument are required to complete the training module and assessment. The O&C training and assessment are both posted on the office website at <http://blogs.shu.edu/cear>.

Clinical supervisors will receive an email with a link to the online O&C assessment instrument. Any evaluation completed by a clinical supervisor should be completed electronically. If a clinical supervisor does not receive the email and link(s) or has difficulty accessing or completing the O&C evaluation(s), please contact OCEAR at 973-761-9347 or at cehsfieldoffice@shu.edu.

Clinical Intern

Clinical supervisors are required to use both of the SHU evaluation instruments over the course of a clinical intern's year-long clinical practice. During the first semester of two days a week, Clinical Practice 1, the clinical supervisor is asked to use the Observation & Conference Report (O&C) three times as the evaluation instrument during three observations. During the second semester of five days a week, Clinical Practice 2, the clinical supervisor is asked to use the O&C during five of the observations (Observations 1, 2, 3, 5 and 6) and the Clinical Competency Inventory (CCI) at the midterm (4th observation) and the final (7th observation).

Appendix 10 is an example of the O&C evaluation instrument. **Appendix 11** is an example of the CCI evaluation instrument. Clinical supervisors are required to review the instruments with the teacher candidate early in the semester to ensure a common understanding of expectations and standards.

OCEAR has developed online training modules and assessments on the O&C and CCI instruments. Clinical supervisors who are mentoring a clinical intern for the first time or are a new hire as an OCEAR clinical supervisor are required to complete the training module assessment. The O&C and CCI training and assessments are posted on the office website at <http://blogs.shu.edu/cear>.

The CCI has been designed to provide feedback on the progress of individual teaching candidates who are completing their clinical practice experience in their teacher preparation program. This performance-based assessment instrument measures key competencies aligned to the 2011 InTASC standards and the edTPA rubrics that are required of all teaching candidates prior to being recommended for certification. The CCI specifies the defining set of competencies that pre-service teachers should demonstrate before being recommended for certification in the State of New Jersey.

Some competencies may not be observable and usually start with the phrase, “Provides evidence of.” It is expected that the candidate will bring evidence of these competencies to a conference. It is the teaching candidate’s responsibility to bring a professional portfolio and additional artifacts to the final assessment conference.

The CCI is to be used as a formative assessment at the midterm evaluation and a summative assessment at the completion of the clinical practice experience, during the last observation. It should be used in conjunction with the O&C that is aligned with the CCI and focuses on the quality of the specific lesson being observed. The CCI is meant to be a cumulative assessment of competencies that the supervisor and cooperating teacher have observed throughout the clinical practice. The CCI should be introduced at the beginning of the clinical practice to guide the development of the teaching candidate and to provide feedback on the candidate’s strengths and areas of improvement.

The procedure for using the CCI is as follows:

1. At the first visit, the supervisor will review the O&C and the CCI with the cooperating teacher.
2. At mid-term, the clinical supervisor and cooperating teacher fill in the CCI independently.
3. The supervisor will hold a mid-point conference with the teaching candidate to go over the CCI. The cooperating teacher will join this conference to discuss mid-point assessment.
4. At the completion of the clinical placement, the clinical supervisor and cooperating teacher fill in the CCI independently and enter the final assessment.
5. At the completion of the clinical practice, the teaching candidate will do a self-assessment/reflection and fill in the CCI.

Please note that the rating of Not Observed cannot be used for the Final Assessment. If a Clinical Supervisor or Cooperating Teacher did not observe a specific indicator in the classroom at the midterm, the midterm conference should have provided guidance to the teacher candidate on how he or she can demonstrate competency in that standard by the final evaluation. If you have a question or reservation about an indicator, please insert a comment explaining your concerns.

At the final (7th) observation, the Clinical Supervisor and Cooperating Teacher must rate all 34 indicators. A teaching candidate needs a 3.0 average, a total of at least 102 points, to be recommended for certification. In addition to being used for recommendation for certification,

please note the Clinical Supervisor and Cooperating Teacher final evaluation grades are factored into the teacher candidate's grade for senior seminar.

Clinical supervisors will receive an email with a link to the online O&C and CCI assessment instruments. Any evaluation completed by a clinical supervisor should be completed electronically. If a clinical supervisor does not receive the email and link(s) or has difficulty accessing or completing the O&C and CCI evaluation(s), please contact OCEAR at 973-761-9347 or at cehsfieldoffice@shu.edu.

Clinical Supervisor Checklist

Appendix 22 is a one page document designed as a checklist for clinical supervisors. The checklist is designed as an overview and outline for some of the specific requirements for the semester. It does not include any of the general expectations and responsibilities of the clinical supervisor.

Appendix 21 provides additional information regarding the Role of the Clinical Supervisor.

Clinical Placement Alert Form

If a teacher candidate displays behaviors or performances that suggest she/he is struggling, a cooperating teacher and/or clinical supervisor can submit a Clinical Placement Alert Form. Any submission of a Clinical Placement Alert Form should be preceded by conversations between the cooperating teacher, clinical supervisor and teacher candidate.

It is important to note that a Clinical Alert Form should be submitted as soon as there is a concern the cooperating teacher or clinical supervisor feels needs to be addressed. However, the cooperating teacher and supervisor should have already discussed the concerns with the teacher candidate. It is in the teacher candidate's best interest to have as much time as possible to address any concerns or work toward improvement.

The direct link to access the form in the OCEAR online database is:

https://shu.co1.qualtrics.com/jfe/form/SV_ezzE5BSxpSA2r41.

The Clinical Placement Alert Form can be submitted electronically using an online survey tool. The Alert Form can be found on the Office website at <http://blogs.shu.edu/cear>. **Appendix 11** is a sample of the Clinical Placement Alert Form.

The Clinical Placement Alert Form is sent to the Director of the Office of Clinical Experiences & Applied Research. Once received and reviewed, the director will work with the cooperating teacher, supervisor, faculty adviser, teacher candidate and other appropriate individuals to develop an intervention and support plan for the teacher candidate.

In the event this support plan is not enough, the College has established a Retention Committee. Please see the detailed information on the Retention Committee in the pre-clinical or clinical intern sections of this handbook.

Evaluation of Cooperating Teacher

As part of OCEAR's efforts for continuous improvement, we are asking clinical supervisors to complete a brief evaluation instrument assessing the cooperating teacher mentoring the clinical intern. The instrument is focused on the cooperating teacher's support and interactions with the

teacher candidate and you, as the clinical supervisor. **Only clinical supervisors of clinical interns in the full-year clinical practice are asked to complete this evaluation.**

Appendix 23 is an example of the Clinical Supervisor Evaluation of Cooperating Teachers in Clinical Practice.

Clinical supervisors will receive an email with a link to the online evaluation instrument. Any evaluation completed by a clinical supervisor should be completed electronically. If a clinical supervisor does not receive the email and link(s) or has difficulty accessing or completing the evaluation(s), please contact OCEAR at 973-761-9347 or at cehsfieldoffice@shu.edu.

Clinical Supervisor Qualifications

Seton Hall University and the Department of Educational Studies has established the following qualifications for clinical supervisors:

1. Have teacher Certification in the area of supervision
2. Earned a Master's Degree; or the equivalent experience in the area of supervision
3. Have a valid Driver's License in the state of New Jersey

If you or someone you know is qualified and interested in being interviewed and potentially hired as a clinical supervisor, please have him/her contact the Office of Clinical Experiences & Applied Research.

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APPENDIX

Following are relevant documents as they pertain to different points throughout the handbook. The purpose is to provide further detail. As always, the most up to date documents can be found by visiting the OCEAR website at <http://blogs.shu.edu/cear>.

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Appendix 1: OCEAR Requirements Calendar**Overview of Requirements in an Academic Year**

Date	Requirement
August 1 st – 31 st	Complete TB/Mantoux testing for entire academic year
End of August	Clinical Practice Fall Convocation, exact date TBD based on SHU academic calendar
Early September	Clinical Experience Fall Convocation, exact date TBD based on SHU academic calendar
September 15 th	Application for Clinical Practice in the following Spring semester deadline
September 15 th	Praxis II passing score deadline provided to OCEAR for Spring semester placement
October 1 st	Application for Clinical Experience in the following Spring semester deadline
TBD	Submission of midterm timesheets by pre-clinical interns; check calendar at http://blogs.shu.edu/cear for specific dates
TBD	Submission of final timesheets by pre-clinical and clinical interns; check calendar at http://blogs.shu.edu/cear for specific dates
Early January	Clinical Practice Spring Convocation, exact date TBD based on SHU academic calendar
Early January	Clinical Experience Spring Convocation, exact date TBD based on SHU academic calendar
February 15 th	Application for Clinical Practice in the following Fall semester deadline
February 15 th	Application for Clinical Experience in the following Fall semester deadline
February 15 th	Praxis II passing score deadline provided to OCEAR for Fall semester placement
March 1 st	Provide new or updated resume to OCEAR
TBD	Submission of midterm timesheets by pre-clinical interns; check calendar at http://blogs.shu.edu/cear for specific dates
TBD	Submission of final timesheets by pre-clinical and clinical interns; check calendar at http://blogs.shu.edu/cear for specific dates

Appendix 2: ESED Course, Course Requirements and Clinical Placement Alignment

Elementary/Special Education Program Clinical Placement Requirements Alignment with Methods Courses

<i>Clinical Experience</i>	<i>Methods Course</i>	<i>Clinical Related Assignments</i>	<i>Assessments</i>
Clinical Experience #1 EDST 2500 <i>Fall Sophomore Year</i> Placement Type: Grades K-2 Placement Length: 60 Hours <i>*Supervisors observe literacy lesson</i>	EDST 2004 Early Literacy	2 whole class lessons Running record (one child)	Lesson Plan, Observation and Conference Report (O&C)
	EDST 2001 Life in the Inclusive Classroom	Observation Journals	
Clinical Experience #2 EDST 2600 <i>Spring Sophomore Year</i> Placement Type: Grades 3-5 Placement Length: 60 Hours <i>*Supervisors observe math or literacy lesson</i>	EDST 2005 Math Methods	2 whole class lessons One on one diagnostic interview	Lesson Plan, Observation and Conference Report (O&C)
	EDST 3005 Literacy Across the Curriculum	1 whole class lesson Observation journals	Lesson Plan
Clinical Experience #3 EDST 2700 <i>Spring Junior Year</i> Placement Type: Special Education Placement Length: 60 Hours	CPSY 2102 Developmental Disabilities	Behavior observation and functional behavior assessment Planning & teaching, if possible, of a social skills lesson	Functional Behavioral Assessment, Observation and Conference Report (O&C)
Clinical Practice #1 EDST 2800 <i>Fall Senior Year</i> Placement Type: Grades 1-5 Placement Length: 2 days per week From the start of the school district's calendar through SHU's reading day <i>*Supervisors observe appropriate lessons for candidate</i>	EDST 2006 Science Methods	2 whole class lessons	Lesson Plan, Observation and Conference Report (O&C)
	CPSY 3400 Literacy & Numeracy Strategies CEAS- min of 2 days for a min of 175 hours	Whole class math assessment & small group math lesson Whole class literacy assessment & small group literacy lesson	4 Rubrics for course assignments
Clinical Practice #2 Student Teaching Placement Length: 600 Hours <i>*Supervisors observe a lesson in each of four main content areas</i>	EDST 4001 Senior Seminar Full Time Placement, no methods classes	edTPA Seminar lesson and teaching requirements	edTPA, Clinical Competency Inventory (CCI), O&C

Total Hours in Placements: 990 Hours

Contact OCEAR at (973)761-9347 or visit <http://blogs.shu.edu/cear> for additional resources & information.

Appendix 2: ESED Course Syllabus – EDST 2500 Clinical Experience 1

ESED - EDST 2500 Clinical Experience 1 (Early Literacy Focus)

Description: This is the first of three clinical experiences for Seton Hall University teacher candidates. It is a 60 hour clinical experience for the undergraduate candidates within the College of Education and Human Services. This clinical placement typically takes place during the following semester for our candidates:

Elementary/Special Education candidates: Fall, Sophomore Year

- Corresponding Courses Include: EDST 2004 Early Literacy and EDST 2001 Life in Inclusive Classrooms
- Placement Criteria: Kindergarten - 2nd classrooms; ELA content

Clinical Experience 1 Learning Expectations and Requirements

Present a professional disposition including: (i) appropriate attire; (ii) respect for the time commitment for the start and end of a field day; (iii) dedicated focus on the K-12 students and tasks immediately at hand, and (iv) proactive communication with the cooperating teacher.

The following opportunities, if available within a setting, are expected of candidates in this placement.

- Plan and teach two Language Arts Literacy lessons (with feedback from cooperating teacher);
- Complete a running record with one student;
- Build positive student relationships during work and non-work times
- Assist in developing the classroom environment (i.e. student work, beginning and end of day routines);
- Support transitions in classroom and around the building;
- Conduct morning meetings, if applicable;
- Support routine activities (i.e. spelling tests, end of day routines);
- Offer individual and small group support and/or instruction;

Evaluation Criteria and Connections

The evaluation form associated with Clinical Experience 1 is called the O & C Report (Observation and Conference Report). It is aligned with the national iTASC standards for developing and new teachers. The O&C is delivered to cooperating teachers and clinical supervisors via an email link during the clinical placement.

Within the O&C, out of the 11 standards identified, the following standards are closely aligned with the expectations for this placement:

1. Learner Development
3. Learning Environments
7. Planning for Instruction
8. Instructional Strategies
9. Professional Learning and Ethical Practice

Evaluation Requirements & Expectations

A teacher candidate receives an O&C evaluation & score from their cooperating teacher and clinical supervisor. Each standard in the O&C is evaluated on a 4 point scale: Emergent (1); Novice (2); Proficient (3), and Advanced Proficient (4). Target evaluation scores for this clinical placement are as follows:

- Pass – 1.5 or higher
- Pass with Remediation – 1.1 – 1.49
- Fail – 1.0 or below

Content focus in corresponding University Courses: Candidates within this clinical experience are addressing the following major concepts in their courses. The goal is the opportunity to see the transition from theory and application to practice within real world classrooms.

- The development of early literacy concepts and skills (i.e. phonemic awareness, phonics, vocabulary, comprehension, early writing, assessment, and fluency)
- Classroom environment, routines, and rules
- Lesson planning
- Motivation and behavior management
- Serving a broad range of learners within a classroom

Appendix 2: ESED Course Syllabus – EDST 2600 Clinical Experience 2

ESED EDST 2600 Clinical Experience 2 (Upper Literacy and Mathematics Focus)

Description: This is the second of three clinical experiences for Seton Hall University teacher candidates. It is a 60 hour clinical experience for the undergraduate candidates within the College of Education and Human Services. This clinical placement typically takes place during the following semester for our candidates:

Elementary/Special Education candidates: Spring, Sophomore Year

- Corresponding Courses Include: EDST 3005 Literacy Across the Curriculum and EDST 2005 Elementary Math Methods in Diverse Classrooms
- Placement Criteria: 3rd - 5th grade classrooms; ELA and Math content

Clinical Experience 2 Learning Expectations and Requirements	Evaluation Criteria and Connections
<p><i>Present a professional disposition including:</i> (i) appropriate attire; (ii) respect for the time commitment for the start and end of a field day; (iii) dedicated focus on the K-12 students and tasks immediately at hand, and (iv) proactive communication with the cooperating teacher.</p> <p>The following opportunities, if available within a setting, are expected of candidates in this placement:</p> <ul style="list-style-type: none"> • Plan and teach one whole class Language Arts Literacy lessons (with feedback from cooperating teacher); • Plan and teach two whole class math lessons (with feedback from cooperating teacher); • Conduct a diagnostic math interview with two students; • Build positive student relationships during both work and non-work times; • Provide additional one-on-one or small groups support; • Assist with evaluating student work; • Assist in developing the classroom environment (i.e. displaying student work; rules); • Support transitions in classroom and around the building; • Conduct morning meetings; • Support routine activities (i.e. spelling tests, end of day routines); 	<p>The evaluation form associated with Clinical Experience 2 is called the O & C Report (Observation and Conference Report). It is aligned with the national inTASC standards for developing and new teachers. The O&C is delivered to cooperating teachers and clinical supervisors via an email link during the clinical placement.</p> <p>Within the O&C, the following standards are closely aligned with the expectations for this placement:</p> <ol style="list-style-type: none"> 1. Learner Development 2. Learner Differences 3. Learning Environments 4. Content Knowledge 5. Application of Content 6. Assessment 7. Planning for Instruction 8. Instructional Strategies 9. Professional Learning and Ethical Practice <p>Evaluation Requirements & Expectations</p> <p>A teacher candidate receives an O&C evaluation & score from their cooperating teacher <u>and</u> clinical supervisor. Each standard in the O&C is evaluated on a 4 point scale: Emergent (1); Novice (2); Proficient (3), and Advanced Proficient (4). Target evaluation scores for this clinical placement are as follows:</p> <p>Pass – 1.75 or higher Pass with Remediation – 1.16 – 1.74 Fail – 1.15 or below</p>

Content focus in corresponding University Courses: Candidates within this clinical experience are addressing the following major concepts in their courses. The goal is the opportunity to see the transition from theory and application to practice within real world classrooms.

- The teaching of literacy concepts, skills, and processes (i.e. literacy across the content areas, reading process, writing process, reading comprehension, and vocabulary, narrative story elements, and informational text structures)
- The understanding of place value, whole number operations, and the meaning of fractions
- Teaching mathematics curriculum focusing on conceptual understanding, procedural fluency, and application/problem solving. This includes navigating the Common Core Standards content domains for each grade level and the eight mathematical practices.
- Designing math lessons that engage students in problem solving and reasoning; using multiple means of assessing student understanding of math concepts and procedures.

Appendix 2: ESED Course Syllabus – EDST 2700 Clinical Experience 3

ESED EDST 2700 Clinical Experience 3 (Serving Students with Disabilities Focus)

Description This is the third of three clinical experiences for Seton Hall University teacher candidates. It is a *60 hour clinical experience* for the undergraduate candidates within the College of Education and Human Services. It takes place during the following semesters for our candidates:

Elementary/Special Education candidates: Spring, Junior Year

- Courses Include: CPSY 2102 Autism/Developmental Disabilities and CPSY 2101 Learning Disabilities
- Placement Options: Inclusion classroom, Push In, Pull Out, Self-Contained, Private Special Education School

Secondary/Special Education candidates: Spring, Junior Year

- Courses Include: Autism/Developmental Disabilities, Learning Disabilities, and Content Methods Course
- Placement Options: Inclusion classroom, Push In, Pull Out, Self-Contained, Private Special Education School (with the opportunity to address the content licensure area)

Clinical Experience 3 Learning Expectations and Requirements	Evaluation Criteria and Connections
<p><u>Present a professional disposition including:</u> (i) appropriate attire; (ii) respect for the time commitment for the start and end of a field day; (iii) dedicated focus on the K-12 students and tasks immediately at hand, and (iv) proactive communication with the cooperating teacher.</p> <p>The following opportunities, if available within a setting, are expected of candidates in this placement:</p> <ul style="list-style-type: none"> • Plan and teach a social skills lesson; • Develop an observational study and intervention plan for a student whose behavior is interfering with his or her learning, social relationships, and overall success in the classroom. (The plan is NOT implemented); • Run morning routines/meetings; • Provide support in integrating technology; • Support small and larger group math and literacy instruction; • Provide one-on-one and small group support where needed; • Support transitions in the classroom and around the building; • Support routine activities and the classroom environment (e.g. displaying student work, behavior management); • Build positive relationships with students; • Observe and participate in opportunities to evaluate K-12 student work to better understand the connection between assessment and next steps in planning and instruction; • Continue practice in the areas of effective questioning, providing meaningful feedback to K-12 learners to enhance their next steps in learning, and closing a lesson to build bridges to future learning; • When possible, attend professional development offerings. 	<p>The evaluation form associated with Clinical Experience 3 is called the O & C Report (Observation and Conference Report). It is aligned with the national InTASC standards for developing and new teachers. The O&C is delivered to cooperating teachers and clinical supervisors via an email link during the clinical placement.</p> <p>Within the O&C, the following standards are closely aligned with the expectations for this placement:</p> <ol style="list-style-type: none"> 1. Learner Development 2. Learner Differences 3. Learning Environment 4. Content Knowledge 5. Application of Content 6. Assessment 7. Planning for Instruction 8. Instructional Strategies 9. Professional Learning 10. Leadership and Collaboration (specifically collaboration with colleagues to support students with disabilities) <p>Evaluation Requirements & Expectations</p> <p>A teacher candidate receives an O&C evaluation & score from their cooperating teacher <u>and</u> clinical supervisor. Each standard in the O&C is evaluated on a 4 point scale: Emergent (1); Novice (2); Proficient (3), and Advanced Proficient (4). Target evaluation scores for this clinical placement are as follows:</p> <ul style="list-style-type: none"> Pass – 2.0 or higher Pass with Remediation – 1.41 – 1.99 Fail – 1.4 or below

Content focus in corresponding University Courses: Candidates within this clinical experience are addressing the following major concepts in their courses. The goal is the opportunity to see the transition from theory and application to practice within real world classrooms.

- Continuum of supports including Universal Design for Learning (UDL), Differentiation, Accommodations and Modifications
- Autism Spectrum Disorder and Intellectual Disabilities (diagnostic criteria, developmental characteristics, instructional strategies, social competence/social skills, functional behavior analysis, transition planning & services)
- Specific Learning Disabilities (diagnostic criteria, developmental characteristics, instructional strategies, RTI)
- Pedagogical Content Knowledge & Application

Appendix 3: SCED Course, Course Requirements and Clinical Placement Alignment**Secondary Education (SCED) Program****Clinical Placement Requirements in Alignment with Methods Courses**

Clinical Placement	Methods Course	Field Related Assignments	Assessments
Clinical Experience #1 EDST 2500 <i>Spring Sophomore Year</i> Placement Type: Middle School/High School Placement Length: 60 Hours <i>*Supervisors observe in content area</i>	EDST2003 – Instructional Theory into Practice	Lesson Plans (at least one taught and observed by supervisor)	Lesson Plan Observation and Conference Report (O&C)
Clinical Experience #2 EDST 2600 <i>Fall Junior Year</i> Placement Type: Middle School/High School Placement Length: 60 Hours <i>*Supervisors observe in content area</i>	EDST3301 – Educational Evaluation	Lesson Plans (at least one taught and observed by supervisor)	Lesson Plan Observation and Conference Report (O&C)
Clinical Experience #3 EDST 2700 <i>Spring Junior Year</i> Placement Type: Middle School/High School Placement Length: 60 Hours <i>*Supervisors observe in content area</i>	Secondary Subject Methods Courses	Lesson Plans Unit Planning	Lesson Plan Observation and Conference Report (O&C)
Clinical Practice #1 EDST 2800 <i>Fall Senior Year</i> Placement Type: Student Application/Request Placement Length: 210 Hours 2 days per week From the start of the school district's calendar through SHU's reading day <i>*Supervisors observe in content area</i>	EDST2501 – Intro to Phil of Ed and Curriculum Development	Action Research Plan	Observation and Conference Report (O&C)
Clinical Practice #2 Spring Senior Year Placement Type: Candidate Application/Request Placement Length: 600 Hours <i>*Supervisors observe in content area</i>	EDST4500 – Senior Seminar	edTPA Seminar lesson and teaching requirements	EdTPA, Clinical Competency Inventory (CCI), O&C, Subject Specific Field Assessment for Cooperating teachers

Total Hours in Placements: 990 Hours

Contact OCEAR at (973)761-9347 or visit <http://blogs.shu.edu/cear> for additional resources & information.

Appendix 3: SCED Course Syllabus – EDST 2500 Clinical Experience 1

SCED EDST 2500 Clinical Experience 1

Description: This is the first of three clinical experiences for Seton Hall University teacher candidates. It is a 60 hour clinical experience for the undergraduate candidates within the College of Education and Human Services. This clinical placement typically takes place during the following semester for our candidates:

Secondary Education candidates: Spring, Sophomore Year

- Corresponding Course: EDST2003: Instructional Theory into Practice
- Placement Criteria: 6th-12th grade; content area focus

Clinical Experience 1 Learning Expectations and Requirements

Present a professional disposition including: (i) appropriate attire; (ii) respect for the time commitment for the start and end of a field day; (iii) dedicated focus on the K-12 students and tasks immediately at hand, and (iv) proactive communication with the cooperating teacher.

The following opportunities, if available within a setting, are expected of candidates in this placement.

- Plan and teach at least one content area lesson (with feedback from cooperating teacher);
- Build positive student relationships during work and non-work times
- Assist in developing the classroom environment (i.e. student work, beginning and end of day routines);
- Support transitions in classroom and around the building;
- Support routine activities
- Offer individual and small group support and/or instruction;

Evaluation Criteria and Connections

The evaluation form associated with Clinical Experience 1 is called the O & C Report (Observation and Conference Report). It is aligned with the national InTASC standards for developing and new teachers. The O&C is delivered to cooperating teachers and clinical supervisors via an email link during the clinical placement.

Within the O&C, out of the 11 standards identified, the following standards are closely aligned with the expectations for this placement:

1. Learner Development
3. Learning Environments
7. Planning for Instruction
8. Instructional Strategies
9. Professional Learning and Ethical Practice

Evaluation Requirements & Expectations

A teacher candidate receives an O&C evaluation & score from their cooperating teacher and clinical supervisor. Each standard in the O&C is evaluated on a 4 point scale: Emergent (1); Novice (2); Proficient (3), and Advanced Proficient (4). Target evaluation scores for this clinical placement are as follows:

- Pass – 1.5 or higher
- Pass with Remediation – 1.1 – 1.49
- Fail – 1.0 or below

Content focus in corresponding University Courses: Candidates within this clinical experience are addressing the following major concepts in their courses. The goal is the opportunity to see the transition from theory and application to practice within real world classrooms.

- Development of different teaching strategies and how to implement them in the classroom
- Connecting knowledge of learners and content to planning
- Self-assessing effectiveness of planning and instruction in content area
- Lesson planning
- Motivation and behavior management
- Serving a broad range of learners within a classroom

Appendix 3: SCED Course Syllabus – EDST 2600 Clinical Experience 2**SCED EDST 2600 Clinical Experience 2**

Description: This is the second of three clinical experiences for Seton Hall University teacher candidates. It is a 60 hour clinical experience for the undergraduate candidates within the College of Education and Human Services. This clinical placement typically takes place during the following semester for our candidates:

Secondary Education candidates: Fall, Junior Year

- Corresponding Course: EDST3301: Educational Evaluation
- Placement Criteria: 6th-12th grade content area classroom

Clinical Experience 2 Learning Expectations and Requirements	Evaluation Criteria and Connections
<p><i>Present a professional disposition including: (i) appropriate attire; (ii) respect for the time commitment for the start and end of a field day; (iii) dedicated focus on the K-12 students and tasks immediately at hand, and (iv) proactive communication with the cooperating teacher.</i></p> <p>The following opportunities, if available within a setting, are expected of candidates in this placement:</p> <ul style="list-style-type: none"> • Plan and teach at least one content area lesson (with feedback from cooperating teacher) • Build positive student relationships during both work and non-work times; • Provide additional one-on-one or small groups support; • Assist with evaluating student work; • Assist in developing the classroom environment (i.e. displaying student work; rules); • Support transitions in classroom and around the building; • Support routine activities 	<p>The evaluation form associated with Clinical Experience 2 is called the O & C Report (Observation and Conference Report). It is aligned with the national inTASC standards for developing and new teachers. The O&C is delivered to cooperating teachers and clinical supervisors via an email link during the clinical placement.</p> <p>Within the O&C, the following standards are closely aligned with the expectations for this placement:</p> <ol style="list-style-type: none"> 1. Learner Development 2. Learner Differences 3. Learning Environments 4. Content Knowledge 5. Application of Content 6. Assessment 7. Planning for Instruction 8. Instructional Strategies 9. Professional Learning and Ethical Practice <p>Evaluation Requirements & Expectations</p> <p>A teacher candidate receives an O&C evaluation & score from their cooperating teacher <u>and</u> clinical supervisor. Each standard in the O&C is evaluated on a 4 point scale: Emergent (1); Novice (2); Proficient (3), and Advanced Proficient (4). Target evaluation scores for this clinical placement are as follows:</p> <p>Pass – 1.75 or higher Pass with Remediation – 1.16 – 1.74 Fail – 1.15 or below</p>

Content focus in corresponding University Courses: Candidates within this clinical experience are addressing the following major concepts in their courses. The goal is the opportunity to see the transition from theory and application to practice within real world classrooms.

- Assessment of student learning
- Creation of wide variety of formal and informal assessments
- Difference between formative and summative assessment
- Connection between planning objectives and assessment of student work
- Planning for content area instruction for wide range of diverse students

Appendix 3: SCED Course Syllabus – EDST 2700 Clinical Experience 3

SCED EDST 2700 Clinical Experience 3 (Content Area Focus)

Description This is the third of three clinical experiences for Seton Hall University teacher candidates. It is a 60 hour clinical experience for the undergraduate candidates within the College of Education and Human Services. It takes place during the following semesters for our candidates:

Secondary candidates: Spring, Junior Year Courses Include:

- Subject Methods Courses (English, Mathematics, Social Studies, Science, Language, Music, Art); Integrating Curriculum and Technology
- Placement Options: Grade 6-12 Content Area Classroom

Clinical Experience 3 Learning Expectations and Requirements	Evaluation Criteria and Connections
<p><u>Present a professional disposition including:</u> (i) appropriate attire; (ii) respect for the time commitment for the start and end of a field day; (iii) dedicated focus on the K-12 students and tasks immediately at hand, and (iv) proactive communication with the cooperating teacher.</p> <p>The following opportunities, if available within a setting, are expected of candidates in this placement:</p> <ul style="list-style-type: none"> • Provide support in integrating technology; • Support small and larger group instruction; • Provide one-on-one and small group support where needed; • Support transitions in the classroom and around the building; • Support routine activities and the classroom environment • Build positive relationships with students; • Observe and participate in opportunities to evaluate secondary student work to better understand the connection between assessment and next steps in planning and instruction; • Plan and implement multiple lessons in content area instruction with cooperating teacher input. • When possible, attend professional development offerings. 	<p>The evaluation form associated with Clinical Experience 3 is called the O & C Report (Observation and Conference Report). It is aligned with the national inTASC standards for developing and new teachers. The O&C is delivered to cooperating teachers and clinical supervisors via an email link during the clinical placement.</p> <p>Within the O&C, the following standards are closely aligned with the expectations for this placement:</p> <ol style="list-style-type: none"> 1. Learner Development 2. Learner Differences 3. Learning Environment 4. Content Knowledge 5. Application of Content 6. Assessment 7. Planning for Instruction 8. Instructional Strategies 9. Professional Learning 10. Leadership and Collaboration (specifically collaboration with colleagues to support students with disabilities) <p>Evaluation Requirements & Expectations</p> <p>A teacher candidate receives an O&C evaluation & score from their cooperating teacher <u>and</u> clinical supervisor. Each standard in the O&C is evaluated on a 4 point scale: Emergent (1); Novice (2); Proficient (3), and Advanced Proficient (4). Target evaluation scores for this clinical placement are as follows:</p> <p>Pass – 2.0 or higher Pass with Remediation – 1.41 – 1.99 Fail – 1.4 or below</p>

Content focus in corresponding University Courses: Candidates within this clinical experience are addressing the following major concepts in their courses. The goal is the opportunity to see the transition from theory and application to practice within real world classrooms.

- Content area definition and scope of learning standards in content area
- Purposes for instructing in content area in grades 6-12
- Developing academic discourse for content area instruction
- Specific strategies and methods for instruction in content area
- Connection of assessment to planning for student mastery
- Supporting diverse learners in an inclusive environment

Appendix 4: SSED Course, Course Requirements and Clinical Placement Alignment**Secondary Special Education (SSED) Program Clinical Placement Requirements Alignment with Methods Courses**

Clinical Placement	Methods Course	Clinical Related Assignments	Assessments
Clinical Experience #1 EDST 2500 <i>Spring Sophomore Year</i> Placement Type: in K-8 placement (40 hours in secondary content; 20 hours in 3-5 grade classroom) Placement Length: 60 <i>*Supervisors observe in content area</i>	EDST2003 – Instructional Theory into Practice	Lesson Plans (at least one taught and observed by supervisor)	Lesson Plan Observation and Conference Report
	MATH AND SCIENCE MAJORS: EDST 2005 Math Methods	2 whole class lessons One on one diagnostic interview	Lesson Plan, Observation and Conference Report (O&C)
	HUMANITIES MAJORS: EDST 3005 Literacy Methods	2 whole class lessons Observation journals	Lesson Plan
Clinical Experience #2 EDST 2600 <i>Fall Junior Year</i> Placement Type: Middle School or High School Placement Length: 60 Hours <i>*Supervisors observe in content area</i>	EDST3301 – Educational Evaluation	Lesson Plans (at least one taught and observed by supervisor)	Lesson Plan Observation and Conference Report (O&C)
	CPSY3400 – Literacy and Numeracy Strategies	2 Whole Class Lessons	Lesson Plan Observation and Conference Report (O&C)
Clinical Experience #3 EDST 2700 <i>Spring Junior Year</i> Placement Type: Middle School or High School Placement Length: 60 Hours <i>*Supervisors observe in content area</i>	Secondary Subject Methods Courses	Lesson Plans Unit Planning	Lesson Plan Observation and Conference Report (O&C)
	CPSY2102 Developmental Disabilities	Behavioral observation and functional behavior assessment Planning & teaching, if possible, of a social skills lesson	Functional Behavior Assessment Observation and Conference Report (O&C)
Clinical Practice #1 EDST 2800 <i>Fall Senior Year</i> Placement Type: Student Application/Request Placement Length: 2 days per week From the start of the school district's calendar through SHU's reading day <i>*Supervisors observe in content area</i>	EDST2501 – Intro to Phil of Ed and Curriculum Development	Action Research Plan	Observation and Conference Report (O&C)
Clinical Practice #2 <i>Spring Senior Year</i> Placement Type: Candidate Application/Request Placement Length: 600 Hours <i>*Supervisors observe in content area</i>	EDST4500 – Senior Seminar	edTPA Seminar lesson and teaching requirements	EdTPA, Clinical Competency Inventory (CCI), O&C, Subject Specific Field Assessment for Cooperating teachers

Total Hours in Placements: 990 Hours

Contact OCEAR at (973)761-9347 or visit <http://blogs.shu.edu/cear> for additional resources & information.

Appendix 4: SSED Course Syllabus – EDST 2500 Clinical Experience 1

SSED EDST 2500 Clinical Experience 1

Description: This is the first of three clinical experiences for Seton Hall University teacher candidates. It is a *60 hour clinical experience* for the undergraduate candidates within the College of Education and Human Services. This clinical placement typically takes place during the following semester for our candidates:

Secondary Special Education candidates: Spring, Sophomore Year

- Corresponding Courses: EDST2003: Instructional Theory into Practice (ALL MAJORS); EDST2500: Math Methods (MATH AND SCIENCE MAJORS); EDST3005: Literacy Methods (HUMANITIES MAJORS)
- Placement Criteria: K-8 school; content area focus 40 hours (grades 6-8); math focus (math and science majors) or ELA focus (humanities majors) 20 hours (grades 3-5)

Clinical Experience 1 Learning Expectations and Requirements

Present a professional disposition including: (i) appropriate attire; (ii) respect for the time commitment for the start and end of a field day; (iii) dedicated focus on the K-12 students and tasks immediately at hand, and (iv) proactive communication with the cooperating teacher.

The following opportunities, if available within a setting, are expected of candidates in this placement.

- Plan and teach at least one content area lesson (with feedback from cooperating teacher grades 6-8);
- Build positive student relationships during work and non-work times
- Assist in developing the classroom environment (i.e. student work, beginning and end of day routines);
- Support transitions in classroom and around the building;
- Support routine activities
- Offer individual and small group support and/or instruction;
- **HUMANITIES MAJORS:** Plan and teach one whole class Language Arts Literacy lessons (with feedback from cooperating teacher grades 3-5);
- **MATH AND SCIENCE MAJORS:** Plan and teach two whole class math lessons (with feedback from cooperating teacher grades 3-5);
- **MATH AND SCIENCE MAJORS:** Conduct a diagnostic math interview with two students;

Evaluation Criteria and Connections

The evaluation form associated with Clinical Experience 1 is called the O & C Report (Observation and Conference Report). It is aligned with the national InTASC standards for developing and new teachers. The O&C is delivered to cooperating teachers and clinical supervisors via an email link during the clinical placement.

Within the O&C, out of the 11 standards identified, the following standards are closely aligned with the expectations for this placement:

1. Learner Development
2. Learner Differences
3. Learning Environments
4. Content Knowledge
5. Application of Content
6. Assessment
7. Planning for Instruction
8. Instructional Strategies
9. Professional Learning and Ethical Practice

Evaluation Requirements & Expectations

A teacher candidate receives an O&C evaluation & score from their cooperating teacher and clinical supervisor. Each standard in the O&C is evaluated on a 4 point scale: Emergent (1); Novice (2); Proficient (3), and Advanced Proficient (4). Target evaluation scores for this clinical placement are as follows:

Pass – 1.5 or higher
 Pass with Remediation – 1.1 – 1.49
 Fail – 1.0 or below

Content focus in corresponding University Courses: Candidates within this clinical experience are addressing the following major concepts in their courses. The goal is the opportunity to see the transition from theory and application to practice within real world classrooms.

- Development of different teaching strategies and how to implement them in the classroom
- Connecting knowledge of learners and content to planning
- Self-assessing effectiveness of planning and instruction in content area
- Lesson planning
- Motivation and behavior management
- Serving a broad range of learners within a classroom
- **HUMANITIES MAJORS:** The teaching of literacy concepts, skills, and processes (i.e. literacy across the content areas, reading process, writing process, reading comprehension, and vocabulary, narrative story elements, and informational text structures)
- **MATH AND SCIENCE MAJORS:** The understanding of place value, whole number operations, and the meaning of fractions
- **MATH AND SCIENCE MAJORS:** Teaching mathematics curriculum focusing on conceptual understanding, procedural fluency, and application/problem solving. This includes navigating the Common Core Standards content domains for each grade level and the eight mathematical practices.
- **MATH AND SCIENCE MAJORS:** Designing math lessons that engage students in problem solving and reasoning; using multiple means of assessing student understanding of math concepts and procedures.

Appendix 4: SSED Course Syllabus – EDST 2600 Clinical Experience 2

SSED EDST 2600 Clinical Experience 2

Description: This is the second of three clinical experiences for Seton Hall University teacher candidates. It is a 60 hour clinical experience for the undergraduate candidates within the College of Education and Human Services. This clinical placement typically takes place during the following semester for our candidates:

Secondary Special Education candidates: Fall, Junior Year

- Corresponding Course: EDST3301: Educational Evaluation; CPSY3400: Literacy and Numeracy Strategies
- Placement Criteria: 6th-12th grade content area classroom

Clinical Experience 2 Learning Expectations and Requirements	Evaluation Criteria and Connections
<p><i>Present a professional disposition including: (i) appropriate attire; (ii) respect for the time commitment for the start and end of a field day; (iii) dedicated focus on the K-12 students and tasks immediately at hand, and (iv) proactive communication with the cooperating teacher.</i></p> <p>The following opportunities, if available within a setting, are expected of candidates in this placement:</p> <ul style="list-style-type: none"> • Plan and teach at least one content area lesson (with feedback from cooperating teacher) • Build positive student relationships during both work and non-work times; • Provide additional one-on-one or small groups support; • Assist with evaluating student work; • Assist in developing the classroom environment (i.e. displaying student work; rules); • Support transitions in classroom and around the building; • Support routine activities • MATH AND SCIENCE MAJORS: Math assessment and teach re-engagement lesson • HUMANITIES MAJORS: Language Arts assessment and teach re-engagement lesson 	<p>The evaluation form associated with Clinical Experience 2 is called the O & C Report (Observation and Conference Report). It is aligned with the national inTASC standards for developing and new teachers. The O&C is delivered to cooperating teachers and clinical supervisors via an email link during the clinical placement.</p> <p>Within the O&C, the following standards are closely aligned with the expectations for this placement:</p> <ol style="list-style-type: none"> 1. Learner Development 2. Learner Differences 3. Learning Environments 4. Content Knowledge 5. Application of Content 6. Assessment 7. Planning for Instruction 8. Instructional Strategies 9. Professional Learning and Ethical Practice <p>Evaluation Requirements & Expectations</p> <p>A teacher candidate receives an O&C evaluation & score from their cooperating teacher <u>and</u> clinical supervisor. Each standard in the O&C is evaluated on a 4 point scale: Emergent (1); Novice (2); Proficient (3), and Advanced Proficient (4). Target evaluation scores for this clinical placement are as follows:</p> <p>Pass – 1.75 or higher Pass with Remediation – 1.16 – 1.74 Fail – 1.15 or below</p>

Content focus in corresponding University Courses: Candidates within this clinical experience are addressing the following major concepts in their courses. The goal is the opportunity to see the transition from theory and application to practice within real world classrooms.

- Assessment of student learning
- Creation of wide variety of formal and informal assessments
- Difference between formative and summative assessment
- Connection between planning objectives and assessment of student work
- Planning for content area instruction for wide range of diverse students
- MATH AND SCIENCE MAJORS: Teaching mathematics and teaching for re-engagement with diverse learners
- HUMANITIES MAJORS: Teaching language arts and teaching for re-engagement with diverse learners

Appendix 4: SSED Course Syllabus – EDST 2700 Clinical Experience 3

SSED EDST 2700 Clinical Experience 3 (Content Area Focus)

Description This is the third of three clinical experiences for Seton Hall University teacher candidates. It is a *60 hour clinical experience* for the undergraduate candidates within the College of Education and Human Services. It takes place during the following semesters for our candidates:

Secondary Special Education Candidates: Spring, Junior Year Courses Include:

- Subject Methods Courses (English, Mathematics, Social Studies, Science, Language, Music, Art); Integrating Curriculum and Technology; CPSY2101: Learning Disabilities; CPSY2102: Developmental Disabilities
- Placement Options: Grade 6-12 Content Area Classroom w/access to inclusion

Clinical Experience 3 Learning Expectations and Requirements	Evaluation Criteria and Connections
<p><u>Present a professional disposition including:</u> (i) appropriate attire; (ii) respect for the time commitment for the start and end of a field day; (iii) dedicated focus on the K-12 students and tasks immediately at hand, and (iv) proactive communication with the cooperating teacher.</p> <p>The following opportunities, if available within a setting, are expected of candidates in this placement:</p> <ul style="list-style-type: none"> • Provide support in integrating technology; • Support small and larger group instruction; • Provide one-on-one and small group support where needed; • Support transitions in the classroom and around the building; • Support routine activities and the classroom environment • Build positive relationships with students; • Observe and participate in opportunities to evaluate secondary student work to better understand the connection between assessment and next steps in planning and instruction; • Plan and implement multiple lessons in content area instruction with cooperating teacher input. • When possible, attend professional development offerings. • Plan and teach a social skills lesson; • Develop an observational study and intervention plan for a student whose behavior is interfering with his or her learning, social relationships, and overall success in the classroom. (The plan is NOT implemented); 	<p>The evaluation form associated with Clinical Experience 3 is called the O & C Report (Observation and Conference Report). It is aligned with the national inTASC standards for developing and new teachers. The O&C is delivered to cooperating teachers and clinical supervisors via an email link during the clinical placement.</p> <p>Within the O&C, the following standards are closely aligned with the expectations for this placement:</p> <ol style="list-style-type: none"> 1. Learner Development 2. Learner Differences 3. Learning Environment 4. Content Knowledge 5. Application of Content 6. Assessment 7. Planning for Instruction 8. Instructional Strategies 9. Professional Learning 10. Leadership and Collaboration (specifically collaboration with colleagues to support students with disabilities) <p>Evaluation Requirements & Expectations</p> <p>A teacher candidate receives an O&C evaluation & score from their cooperating teacher <u>and</u> clinical supervisor. Each standard in the O&C is evaluated on a 4 point scale: Emergent (1); Novice (2); Proficient (3), and Advanced Proficient (4). Target evaluation scores for this clinical placement are as follows:</p> <p>Pass – 2.0 or higher Pass with Remediation – 1.41 – 1.99 Fail – 1.4 or below</p>

Content focus in corresponding University Courses: Candidates within this clinical experience are addressing the following major concepts in their courses. The goal is the opportunity to see the transition from theory and application to practice within real world classrooms.

- Content area definition and scope of learning standards in content area
- Purposes for instructing in content area in grades 6-12
- Developing academic discourse for content area instruction
- Specific strategies and methods for instruction in content area
- Connection of assessment to planning for student mastery
- Supporting diverse learners in an inclusive environment
- Continuum of supports including Universal Design for Learning (UDL), Differentiation, Accommodations and Modifications
- Autism Spectrum Disorder and Intellectual Disabilities (diagnostic criteria, developmental characteristics, instructional strategies, social competence/social skills, functional behavior analysis, transition planning & services)
- Specific Learning Disabilities (diagnostic criteria, developmental characteristics, instructional strategies, RTI)
- Pedagogical Content Knowledge & Application

Appendix 5: CEAS Course, Course Requirements and Clinical Placement Alignment

CEAS Clinical Placement Requirements in Alignment with Methods Courses

Clinical Placement	Methods Course	Clinical Related Assignments	Assessments
Minimum of 50 hours of pre-professional experience which occurs prior to clinical practice. Hours can consist of tutoring, substituting, day care work, after school activities, etc. NJDOE Memo Nov. 2015	Depending on when experiences are fulfilled	Documentation of experiences	Completion of CEAS Diversity Chart
<p>Clinical Practice #1 EDST 6334</p> <p>Placement Length: 210 Hours</p> <p>2 days per week From the start of the school district's calendar through SHU's reading day</p> <p><i>*ELED: Supervisors observe a lesson in Language Arts and Math</i></p> <p><i>*SCED: Supervisors observe at least two lessons in subject concentration</i></p>	<p><i>ELED: Math, Language Arts, Science/Social Studies</i></p> <p><i>SCED: Methods course in subject concentration, Advanced Strategies & Assessment of Student Learning</i></p>	<p>ELEMENTARY: Math: 1. Administer a diagnostic interview with 2 students 2. Teach, assess and reflect upon two lessons to the full class.</p> <p>Language Arts: 1. A running record assessment with one student in their placement. 2. Teach, assess and reflect upon two lessons (one reading comprehension & one writing)</p> <p>Science: Teach, assess and reflect upon two full class lessons.</p> <p>Social Studies: Teach, assess and reflect upon one full class lesson.</p> <p>SECONDARY: Teach, assess and reflect upon four full class lessons in the subject area certification</p>	Lesson Plans, Observation and Conference Report (O&C)
<p>Clinical Practice #2 Student Teaching Placement Length: 600 Hours</p> <p><i>*ELED: Supervisors observe a lesson in each of the four main content areas</i></p> <p><i>*SCED: Supervisors observe lessons in subject concentration</i></p>	<p>EDST 6426 Seminar</p> <p>Full Time Placement</p>	EdTPA	EdTPA, Clinical Competency Inventory (CCI) and O&C.

Total Hours in Placements: 860 Hours

Appendix 6: Pre-Clinical Intern/Clinical Practice 1 Timesheet SAMPLE**SETON HALL UNIVERSITY****The Office of Clinical Experiences & Applied Research***Timesheet for Clinical Experiences and Clinical Practice 1***Name:** _____ **ID #** _____**Semester/Year of Experience or Clinical Practice 1:** _____**Circle:** Clinical Experience 1 Clinical Experience 2 Clinical Experience 3 Clinical Practice 1**School Day Hours:** (Indicate Req'd Teacher Hours from arrival to departure): _____**Cooperating School:** _____**Cooperating Teacher:** _____

- Please record the dates and times of your field experience for the current semester. Timesheets are submitted at midterm & end of semester

- If cooperating teacher has preparation periods, work with the teacher to plan learning activities. To count periods/blocks when you are not preparing with your mentor, follow and observe students in their alternative educational settings.

- Use the "Activities Column" to keep a detailed record of your engagement and participation in the classroom.

*Activities include, but are not limited to: 1-1 Tutoring, Small Group Instruction, Pull-Out Instruction, In-Class Support, Teaching Lesson.

- See the calendar on the website at <http://blogs.shu.edu/cear> for midterm & final submission dates of timesheets; and for another copy of timesheet, if needed

Date	Time In	Time Out	Activities	Total Hrs.
			TOTAL HOURS	

Cooperating Teacher Signature: _____ **Date:** _____

Appendix 7: Clinical Intern/Clinical Practice 2 Timesheet SAMPLE

Student Name: _____ School: _____ Semester: _____

1. Please indicate attendance with the following: P= Present A= Absent T= Tardy
2. If the Clinical Intern is not present for the entire day, please indicate late arrival or early dismissal time and reason.
3. Completed, signed form is submitted online to the Office of Clinical Experiences & Applied Research at cehsfieldoffice@shu.edu. It may be scanned or sent as a screen shot.

Week Start and End Date	Monday	Tuesday	Wednesday	Thursday	Friday	Cooperating Teacher Initials
Week 1 Dates:						
Week 2 Dates:						
Week 3 Dates:						
Week 4 Dates:						
Week 5 Dates:						
Week 6 Dates:						
Week 7 Dates:						
Week 8 Dates:						
Week 9 Dates:						
Week 10 Dates:						
Week 11 Dates:						
Week 12 Dates:						
Week 13 Dates:						
Week 14 Dates:						
Week 15 Dates:						
Week 16 Dates:						

Clinical Intern Signature: _____ Cooperating Teacher Signature: _____

Appendix 8: Diversity Policy for Clinical Placement & Charts

EPP Policy: All initial teacher candidates in EDST must complete a clinical experience with P-12 students from diverse groups including students with exceptionalities, English Language Learners, diverse socio-economic levels, gender, race and ethnicity.

Initial Programs Procedure:

1. The Office of Clinical Experiences and Applied Research (OCEAR) places teacher candidates in schools for Clinical Experiences 1 and 2. Candidates are responsible for filling out the demographics of the classroom/ school and returning the form to OCEAR when handing in their midterm timesheets each semester.
2. Before placing a candidate in Clinical Experience 3, the OCEAR reviews each candidate's placements to ensure they have had experiences in urban and suburban settings as well as experiences with ELLs and students with exceptionalities.
3. As needed, the placement for Clinical Experience 3 will make up any deficit, to ensure each candidate has experiences in all of the categories.
4. The OCEAR will track each individual candidate. In the case the candidate has completed the three clinical experiences and is missing a category, the OCEAR will place a candidate for Clinical Practice 1 in a setting to ensure diversity.

Advanced Programs Procedure:

1. Candidates are required to complete 50 hours of experience in a variety of different settings prior to being placed in Clinical Practice. As indicated in the NJ state code, Hours can consist of tutoring, substituting, day care work, after school activities, etc.
2. Teacher candidates in the advanced degree program are to track the hours and experiences on the chart provided.
3. Prior to being placed in Clinical Practice, the CEAS Program Director and Director of OCEAR will review the experiences and information provided on the demographics.
4. The OCEAR, in conjunction with the CEAS program director, will review each individual candidate's 50 hours. In the case the candidate has completed these hours and is missing a category, the OCEAR will seek additional hours in an alternate setting, a split placement in two settings, or another placement option to ensure diversity prior to allowing that candidate to apply for certification.

NOTE: The following forms are completed electronically by each candidate. They are asked here: <https://tltc.shu.edu/ocear/>.

Seton Hall University Clinical Placement Diversity Demographic Chart – Initial Programs

Teacher Candidate: _____

Program and Content: _____

Year of Anticipated Graduation: _____

	District	School	Grade
Clinical Experience 1			
Clinical Experience 2			
Clinical Experience 3			
Clinical Practice 1			
Clinical Practice 2			

For all placements, please reference demographics at the school level. The following site is a good place to start to find the data being requested - <https://rc.doe.state.nj.us/SearchForSchool.aspx?>. If you are unable to find all of the information requested or if you are placed at a Catholic or private school, you may need to speak with a school administrator or gather the information from other valid sources in order to complete the chart.

	Total number of students	# Male	# Female	# Students with free or reduced lunch (Economically Disadvantaged)	# ESL, ELL, LEP (Include students who are now mainstreamed, but who attended ESL)	# Special Education students (Include those with IEPs, 504 plans in pullout, self-contained, or mainstreamed)	# Caucasian / White	# African American / Black	# Latino/ Hispanic	# Asian
Clinical Experience 1										
Clinical Experience 2										
Clinical Experience 3										
Clinical Practice 1										
Clinical Practice 2										

Seton Hall University Clinical Placement Diversity Demographic Chart – CEAS Post-Baccalaureate

Teacher Candidate: _____

Certification area: (Elementary Ed or Secondary, if Secondary, list subject area, as well.) _____

Program and Content: CEAS

Year of Anticipated Graduation: _____

List of different schools/agencies where 50 hours were completed. If you have completed more than 50 hours, document that, as well.

District	School/Agency	Grade	Number of Hours

For all placements, please reference demographics at the school level. The following site is a good place to start to find the data being requested - <https://rc.doe.state.nj.us/SearchForSchool.aspx?>. If you are unable to find all of the information requested or if you are placed at a Catholic or private school, you may need to speak with a school administrator or gather the information from other valid sources in order to complete the chart.

	Total number of students in school	% Students with free or reduced lunch (Economically Disadvantaged)	% ESL, ELL, LEP (Include students who are now mainstreamed, but who attended ESL)	% Special Education students (Include those with IEPs, 504 plans in pullout, self-contained, or mainstreamed)	% Caucasian / White	% African American / Black	% Latino/ Hispanic	% Asian

*NB- The OCEAR, in conjunction with the CEAS program director, will review each individual candidate's 50 hours. In the case the candidate has completed these hours and is missing a category, the OCEAR will seek additional hours in an alternate setting, a split placement in two settings, or another placement option to ensure diversity prior to allowing that candidate to apply for certification.

Appendix 9: PRAXIS II Registration & Test Information**PRAXIS INFORMATION**

(The NJ DOE may change pass rates or test requirements, providing notice of the change, and we are bound to the rules and code of the state in order to insure licensure.)

- ✓ Use the chart below to locate the test you need to take as per your certification.
- ✓ NJ Test Code: 7666 Seton Hall Test Code: RA2811
- ✓ For more information, on registering for a test, please visit the ETS Website at <http://www.ets.org/praxis/nj/requirements>
- ✓ Passing scores must be received in OCEAR by November 1st for a Spring placement and May 1st for a Fall placement

To Be Certified In	You Need to Take	CDT	Pass Score
Elementary K-6	Elementary Education: Multiple Subjects	5001	
Elementary K-6 Elementary School with Subject Matter Preparation: Language Arts Literacy (5-8)	✓ Reading and Language Arts	5002	157
	✓ Mathematics	5003	157
	✓ Social Studies	5004	155
	✓ Science	5005	159
	Middle School English Language Arts	5047	164
Elementary School with Subject Matter Preparation: Mathematics (5-8)	Middle School Mathematics	5169	165
Elementary School with Subject Matter Preparation: Science (5-8)	Middle School Science	5440	150
Elementary School with Subject Matter Preparation: Social Studies (5-8)	Middle School Social Studies	5089	158
Secondary Education Science: Concentration Biology	Biology Content Knowledge (Additional Requirement General Science Content Knowledge)	5235	152
General Science: Content Knowledge	Science: Content Knowledge	5435	152
Secondary Education Science: Concentration Chemistry	Chemistry Content Knowledge (Additional Requirement General Science Content Knowledge)	5245	152
Secondary Education Science: Concentration Earth and Space Science	Earth and Space Content Knowledge (Additional Requirement General Science Content Knowledge)	5571	153
Secondary Education Science: Concentration Physics	Physics Content Knowledge (Additional Requirement General Science Content Knowledge)	5265	141
Secondary Education Science: Concentration Social Studies	Social Studies Content Knowledge	5081	157
Secondary Education Math	Math Content Knowledge	5161	160
Secondary Education English, Language, Literature and Composition	English Content Knowledge	5038	167
Secondary Education: Spanish*	Spanish Content Knowledge	5195	168
Secondary Education: Music	Music Content Knowledge	5113	153
Secondary Education: Art	Art Content Knowledge	5134	158

*Spanish & all World Language majors must also pass the OPI (Oral Proficiency Interview) to receive state licensure.

Appendix 10: Observation & Conference (O&C) Report

SHU - CEHS Observation & Conference Report (version 2.4)

The purpose of the O&C evaluation instrument is to provide feedback to the teacher candidate on an observed lesson. The Observation & Conference (O&C) is the evaluation instrument used by both the cooperating teacher and clinical supervisor in Clinical Experiences 1, 2 and 3 and in Clinical Practice 1. It is only used by the clinical supervisor in Clinical Practice 2. It is closely aligned with the Clinical Competency Inventory (CCI) and will help guide the development of the candidate in Clinical Practice 2.

The teacher candidate must be given a score (or marked as 'Not Observed') for each indicator. Please use the 'Additional Comments' section for each indicator to provide support and feedback for the candidate. There are also opportunities at the end of the evaluation to document detailed strengths, areas of improvement and opportunities for reflection and growth.

If you are new to supervision or mentor teaching at SHU and/or would like to refresh your knowledge of the O&C evaluation instrument, there is a PPT overview and assessment available on the Office of Clinical Experiences & Applied Research website. The O&C materials can be found at, <http://blogs.shu.edu/cear>.

Information on the Grade for Clinical Placement

The final grade for Clinical Experience 1, 2 and 3 and for Clinical Practice 1 will be determined by the eleven competency/indicator evaluation scores earned by the teacher candidate. There is no O&C final grade for teacher candidates in Clinical Practice 2.

Following is the information and scoring for Pass, Pass with Remediation and Fail.

Pass

The teacher candidate score falls at or above the Passing score for his/her Clinical Experience or Clinical Practice I. Passing scores for each Clinical Experience and Clinical Practice I are as follows:

Clinical Experience 1 - 1.5 or higher
Clinical Experience 2 - 1.75 or higher
Clinical Experience 3 - 2.00 or higher
Clinical Practice 1 - 2.50 or higher

Pass with Remediation

The teacher candidate score falls between the Pass With Remediation (PWR) and Fail range for his/her Clinical Experience or Clinical Practice I. PWR scores for each Clinical Experience and Clinical Practice I are as follows:

Clinical Experience 1 - between 1.1 and 1.49
Clinical Experience 2 - between 1.16 and 1.74
Clinical Experience 3 - between 1.41 and 1.99
Clinical Practice 1 - between 1.71 and 2.49

Fail

The teacher candidate did not meet the minimum passing score for a Pass With Remediation (PWR) and has earned a Fail for this his/her Clinical Experience or Clinical Practice I. Failing scores for Clinical Experience and Clinical Practice I are as follows:

Clinical Experience 1 - 1.0 or below
Clinical Experience 2 - 1.15 or below
Clinical Experience 3 - 1.4 or below
Clinical Practice 1 - 1.7 or below

The policy for candidates earning a PWR or Failing score from either a cooperating teacher or clinical supervisor evaluation is explained in detail earlier in the Clinical Placement Handbook.

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Evaluator

- Cooperating Teacher
- SHU Field Supervisor

Cooperating Teacher Name:

First Name _____
Last Name _____

Supervisor name:

First Name _____
Last Name _____

Date of Observation

Candidate Name:

First Name _____
Last Name _____

Candidate Email: (Please enter the candidate's **Seton Hall** email, e.g.
"Elizabeth.Seton@student.shu.edu")

Email Address _____

Verify Email Address _____

Candidate Program within Educational Studies:

If the candidate is SCED, CEAS/SCED, or SCED/SSED, please indicate the specific program:

School (of placement):

School Please provide the name of your school, its address, state, and zip code.

Grade Level (of placement):

Subject (placement): (Choose all that apply)

- English
- Math
- Social Studies
- Science
- Music
- Art
- French
- Italian
- Spanish
- Media/Digital Research
- Other

Clinical Experience Level (of student):

Please indicate the number of the observation you are completing for the student in Clinical Practice 1:

Please indicate the number of the observation you are completing for the student in Clinical Practice 2:

1. Learner Development

The candidate shall understand how learners grow and develop, recognizing that patterns of learning and development vary individually within and across the cognitive, linguistic, social, emotional, and physical areas, and designs and implements developmentally appropriate and challenging learning experiences.

- **Not Observed**
- **Emergent** Exhibits difficulty in implementing learning experiences and/or interacting with learners.
- **Novice** Implements learning experiences with limited competence that requires further guidance from either the cooperating teacher and/or supervisor. Needs more guidance on interacting with learners on a developmental level.
- **Proficient** Identifies and plans learning experiences based on students' developmental stages. Respectfully interacts with learners and is sensitive to their needs.
- **Advanced Proficient** Designs and implements developmentally appropriate and challenging learning experiences. Interacts with learners with sensitivity to developmental stages, cultural, linguistic, social and academic differences.

Additional (Learner Development) Comments: (If 'Not Observed' is selected, please provide written explanation.)

2. Learning Differences

The candidate uses understanding of individual differences and diverse cultures and communities to ensure inclusive learning environments that enable each learner to meet high standards.

- **Not Observed**
- **Emergent** Prepares and delivers instruction oriented towards the whole class.
- **Novice** Develops and delivers instruction to address the needs of learners on an inconsistent basis.
- **Proficient** Designs and delivers instruction based on the needs of each student. Modifications to lessons are made for students with special needs, ELL and different learning styles.
- **Advanced Proficient** Applies and adapts instruction that engages the learners in ways that complement their learning styles. Modifies instruction to reflect the diverse cultures and communities of learners.

Additional (Learning Differences) Comments: (If 'Not Observed' is selected, please provide written explanation.)

3. Learning Environment

The candidate works with others (learners, families and colleagues) to create environments that support individual and collaborative learning, and that encourage positive social interaction, active engagement in learning, and self-motivation.

- **Not observed**
- **Emergent** Demonstrates limited classroom management techniques and interactions conducive to an effective classroom environment.
- **Novice** Begins to create an environment that encourages and supports all learners. Classroom management techniques and interactions are generally appropriate.
- **Proficient** Creates an environment that encourages and supports most learners. Demonstrates warmth, caring and sensitivity. Implements classroom management techniques and facilitates interactions that are conducive to an effective learning environment.
- **Advanced Proficient** Creates an environment that encourages and supports all learners. Consistently implements effective classroom management techniques and fosters interactions which maintain a respectful, polite and culturally sensitive learning environment.

Additional (Learning Environment) Comments: (If 'Not Observed' is selected, please provide written explanation.)

4. Content Knowledge

The candidate understands the central concepts, tools of inquiry, and structures of the discipline(s) he or she teaches and creates learning experiences that make these aspects of the discipline accessible and meaningful for learners to assure mastery of the content.

- **Not Observed**
- **Emergent** Delivers instruction based on insufficient content knowledge, theory and principles of the discipline.
- **Novice** Delivers instruction based on superficial content knowledge, theory and principles of the discipline resulting in inconsistent learning of subject matter.
- **Proficient** Delivers instruction based on content knowledge, theory and principles of the discipline allowing meaningful learning and mastery of subject matter.
- **Advanced Proficient** Delivers instruction that demonstrates depth and breadth of the content knowledge, theory and principles of the discipline. Incorporates appropriate materials and consistently makes learning experiences meaningful and relevant which leads to mastery of subject matter.

Additional (Content Knowledge) Comments: (If 'Not Observed' is selected, please provide written explanation.)

5. Application of Content

The clinical intern understands how to connect concepts and use differing perspectives to engage learners in critical thinking creativity, and collaborative problem solving related to authentic local and global issues.

- **Not Observed**
- **Emergent** Asks factual questions and instruction does not include concept connections. Questions do not engage learners in critical thinking. Shows lack of understanding of the concepts needed in order to engage learners in making connections to solve real world problems.
- **Novice** Asks recall and identification questions. Instruction includes some concept connections. Questions engage some learners in critical or divergent thinking. Shows an incomplete understanding of the concepts needed in order to engage learners in making connections to solve real world problems.
- **Proficient** Asks application, analysis and synthesis questions. Instruction includes making connections to concepts and using a variety of perspectives to engage all learners in critical and divergent thinking. Shows a complete and correct understanding of the concepts needed in order to engage learners in making connections to solve real world problems.
- **Advanced Proficient** Asks application, analysis, synthesis and evaluation questions. Instruction includes making connections to concepts using many perspectives to engage all learners in

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critical and divergent thinking. Shows a thorough understanding of the concepts needed to engage learners and extend learners' abilities to solve real world problems.

Additional (Application of Content) Comments: (If 'Not Observed' is selected, please provide written explanation.)

6. Assessment

The candidate understands and uses multiple methods of assessment to engage learners in their own growth, to monitor learner progress, and to guide the teacher's and learner's decision making.

- **Not Observed**
- **Emergent** Uses one method or inappropriate methods of assessment that do not engage learners in the process. Assessment does not include feedback to students. There is no attempt to use data driven decision making.
- **Novice** Uses a few or the same methods of assessment and engages some learners in the process. Assessment includes minimal feedback to students. Some data is used to guide the students' and teacher's decision making.
- **Proficient** Uses multiple formative and summative assessments. Engages most learners in the assessment process. Assessment includes targeted feedback to students. Data is used to guide the students' and teacher's decision making.
- **Advanced Proficient** Uses a variety of formative and summative assessments. Provides differentiated assessments to meet individual student needs. Assessment includes specific detail and feedback. Data includes multiple measures and is used to make decisions about the student's learning and to inform the teacher's instruction.

Additional (Assessment) Comments: (If 'Not Observed' is selected, please provide written explanation.)

7. Planning for Instruction

The teacher plans instruction that supports every student in meeting rigorous learning goals by drawing upon knowledge of content areas, curriculum, cross-disciplinary skills, and pedagogy, as well as knowledge of learners and the community context.

- **Not Observed**
- **Emergent** Plans instruction that does not meet the learning goals for students. Uses minimal knowledge of curriculum, pedagogy or community context to plan instruction and may not take into consideration the knowledge of learners.
- **Novice** Plans instruction that meets the learning goals for some students. Uses some knowledge of curriculum, pedagogy or community context to plan instruction and takes into consideration the knowledge of some of the learners to plan instruction.
- **Proficient** Plans instruction that shows an understanding of the learning goals for all students. Uses knowledge of curriculum, pedagogy, community context and learners to plan instruction.
- **Advanced Proficient** Plans instruction that shows complete and correct understanding of rigorous learning goals for all students. Uses knowledge of curriculum, pedagogy, community context and all learners to plan instruction.

Additional (Planning for Instruction) Comments: (If 'Not Observed' is selected, please provide written explanation.)

8. Instructional Strategies

The candidate understands and uses a variety of instructional strategies to encourage learners to develop

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deep understanding of content areas and their connections, and to build skills to apply knowledge in meaningful ways.

- **Not Observed**
- **Emergent** Uses instructional strategies to present content. Strategies may not build learners' skills to make connections and apply knowledge.
- **Novice** Uses instructional strategies that encourage learners to develop content knowledge. Strategies begin to build learners' skills to make connections and apply knowledge.
- **Proficient** Uses a variety of instructional strategies that encourage learners to develop an understanding of content. Strategies build the learners' skills to make connections and apply knowledge.
- **Advanced Proficient** Uses rich and varied instructional strategies that encourage learners to develop a deep understanding of content. Strategies build and extend the learners' understanding of content to make multiple connections and apply knowledge.

Additional (Instructional Strategies) Comments: (If 'Not Observed' is selected, please provide written explanation.)

9. Professional Learning and Ethical Practice

The candidate engages in ongoing professional learning and uses evidence to continually evaluate their practice, particularly the effects of their choices and actions on others (learners, families, other professionals, and the community), and adapts practice to meet the needs of each learner.

- **Not Observed**
- **Emergent** Candidate may participate in ongoing professional learning which may be demonstrated during the lesson. Candidate does not modify or adjust instruction based on feedback to meet the needs of each learner.
- **Novice** Candidate participates in ongoing professional learning which is sometimes demonstrated during the lesson. Teaching and learning remains basically the same without appropriate modifications to meet the needs of each learner.
- **Proficient** Candidate participates in ongoing professional learning which is demonstrated during the lesson. Uses evidence-based teaching strategies to teach students and reflects on his/her practice. Candidate modifies instruction based on feedback/results and plans lessons accordingly to meet the needs of each learner.
- **Advanced Proficient** Candidate participates in ongoing professional learning which is consistently demonstrated during the lesson. Candidate uses evidence-based teaching strategies and reflection to improve his/her practice. Candidate modifies instruction based on feedback/results and plans lessons that nurture metacognition skills in each learner.

Additional (Professional Learning and Ethical Practice) Comments: (If 'Not Observed' is selected, please provide written explanation.)

10. Leadership and Collaboration

The candidate seeks appropriate leadership roles and opportunities to take responsibility for student learning, to collaborate with learners, families, colleagues, other school professionals, and community members to ensure learner growth and to advance the profession.

- **Not Observed**
- **Emergent** Provides no evidence of contributing to the school and or district. Communicates periodically with colleagues, parents, and other school professionals. Makes little or no attempt to participate in activities with parents and community. Makes no attempt to assume leadership roles within the school.
- **Novice** Provides some evidence of contributions to the school and district. Communicates with colleagues, parents, and other school professionals. Sometimes participates in activities

with parents and community. Makes minimal attempt to assume leadership roles within the school.

- **Proficient** Provides evidence of contributing to the school and district. Collaborates with colleagues, parents, and other school professionals. Participates in activities with parents and community, professional in-service, and assumes leadership roles, as appropriate.
- **Advanced Proficient** Provides evidence of many contributions to the school and district. Collaborates with colleagues, parents, and other school professionals. Participates in activities with parents and community, professional in-service, and assumes leadership roles in various capacities, as appropriate. Seeks out opportunities to assume additional responsibilities in the school community or the profession.

Additional (Leadership & Collaboration) Comments: (If 'Not Observed' is selected, please provide written explanation.)

11. Professional Responsibility

The candidate acts in accordance with legal and ethical responsibilities and uses integrity and fairness to promote the success of all learners.

- **Not Observed**
- **Emergent** Professional interactions and practices do not always demonstrate integrity and fairness towards all students. May not consistently follow the school's policies, regulations or timelines.
- **Novice** Professional interactions and some practices may be characterized by fairness, integrity, respect or confidentiality. Complies with the policies of the school, professional teaching standards and Code of Ethics to promote the success of students.
- **Proficient** Professional interactions and practices are characterized by fairness, integrity, respect and confidentiality. Abides by the policies of the school, professional teaching standards and Code of Ethics to promote the success of all students.
- **Advanced Proficient** Professional interactions and practices are characterized by fairness, integrity, respect and confidentiality. Models exemplary professional behavior by following the policies of the school, professional teaching standards and applies the Code of Ethics to promote the success of all students.

Additional (Professional Responsibility) Comments: (If 'Not Observed' is selected, please provide written explanation.)

Brief summary of lesson and NJ Student Learning Standards addressed:

Strengths:

Identify strengths of the teacher candidate in any applicable area (dispositions, classroom management, lesson development, planning and assessment, student relationships, etc.)

Suggestions for Lesson Improvement:

Recommendations/Reflections for Professional Growth/Areas of Improvement:

Overall Assessment of Teacher Candidate in the Classroom

Please use all factors during your time with the teacher candidate to identify a level of performance of the teacher candidate in the classroom. It is important to note that the Clinical Experiences 1, 2 and 3 and the Clinical Practice 1 and 2 are a continuum. We expect to see growth over time for each teacher candidate. It is not the college's expectation that a first or second semester sophomore (Clinical Experience 1 or 2) will achieve the same level of performance as a second semester senior (Clinical Practice 2).

Any significant strengths or areas of improvement the teacher candidate can reflect upon should be included in the comment sections above.

If you have additional concerns or questions regarding the teacher candidate's performance in the classroom, please see the Clinical Placement Handbook for policies and procedures regarding a Clinical Placement Alert Form. The Clinical Placement Handbook can be found at <http://blogs.shu.edu/cear>.

- Emergent
- Novice
- Proficient
- Advanced Proficient

Appendix 10A: Observation & Conference (O&C) Report for CE 3 Placements in ESED (Special Education Setting)

The purpose of the O&C evaluation instrument is to provide feedback to the teacher candidate on an observed lesson. The Observation & Conference (O&C) is the evaluation instrument used by both the cooperating teacher and clinical supervisor in Clinical Experiences 1, 2 and 3 and in Clinical Practice 1. It is only used by the clinical supervisor in Clinical Practice 2. It is closely aligned with the Clinical Competency Inventory (CCI) and will help guide the development of the candidate in Clinical Practice 2.

The teacher candidate must be given a score (or marked as 'Not Observed') for each indicator. Please use the 'Additional Comments' section for each indicator to provide support and feedback for the candidate. There are also opportunities at the end of the evaluation to document detailed strengths, areas of improvement and opportunities for reflection and growth.

If you are new to supervision or mentor teaching at SHU and/or would like to refresh your knowledge of the O&C evaluation instrument, there is a PPT overview and assessment available on the Office of Clinical Experiences & Applied Research website. The O&C materials can be found at, <http://blogs.shu.edu/cear>.

Information on the Grade for Clinical Placement

The final grade for Clinical Experience 1, 2 and 3 and for Clinical Practice 1 will be determined by the eleven competency/indicator evaluation scores earned by the teacher candidate. There is no O&C final grade for teacher candidates in Clinical Practice 2.

Following is the information and scoring for Pass, Pass with Remediation and Fail.

Pass

The teacher candidate score falls at or above the Passing score for his/her Clinical Experience or Clinical Practice I. Passing scores for each Clinical Experience and Clinical Practice I are as follows:

Clinical Experience 1 - 1.5 or higher

Clinical Experience 2 - 1.75 or higher

Clinical Experience 3 - 2.00 or higher

Clinical Practice 1 - 2.50 or higher

Pass with Remediation

The teacher candidate score falls between the Pass With Remediation (PWR) and Fail range for his/her Clinical Experience or Clinical Practice I. PWR scores for each Clinical Experience and Clinical Practice I are as follows:

Clinical Experience 1 - between 1.1 and 1.49

Clinical Experience 2 - between 1.16 and 1.74

Clinical Experience 3 - between 1.41 and 1.99

Clinical Practice 1 - between 1.71 and 2.49

Fail

The teacher candidate did not meet the minimum passing score for a Pass With Remediation (PWR) and has earned a Fail for this his/her Clinical Experience or Clinical Practice I. Failing scores for Clinical Experience and Clinical Practice I are as follows:

Clinical Experience 1 - 1.0 or below

Clinical Experience 2 - 1.15 or below

Clinical Experience 3 - 1.4 or below

Clinical Practice 1 - 1.7 or below

The policy for candidates earning a PWR or Failing score from either a cooperating teacher or clinical supervisor evaluation is explained in detail earlier in the Clinical Placement Handbook.

Evaluator

- ☐ Cooperating Teacher
- ☐ SHU Field Supervisor

Cooperating Teacher Name:

First Name _____

Last Name _____

Supervisor name:

First Name _____

Last Name _____

Date of Observation

Candidate Name:

First Name _____

Last Name _____

Candidate Email: (Please enter the candidate's **Seton Hall** email, e.g.
"Elizabeth.Seton@student.shu.edu")

Email Address _____

Verify Email Address _____

Candidate Program within Educational Studies:

If the candidate is SCED, CEAS/SCED, or SCED/SSSED, please indicate the specific program:

School (of placement):

School Please provide the name of your school, its address, state, and zip code.

Grade Level (of placement):

Subject (placement): (Choose all that apply)

- ☐ English
- ☐ Math
- ☐ Social Studies
- ☐ Science
- ☐ Music
- ☐ Art
- ☐ French
- ☐ Italian
- ☐ Spanish
- ☐ Media/Digital Research
- ☐ Other

Clinical Experience Level (of student):

Please indicate the number of the observation you are completing for the student in Clinical Practice 1:

Please indicate the number of the observation you are completing for the student in Clinical Practice 2:

Learner Development and Individual Learning Differences

1. Candidate responds to the abilities and behaviors of individual learners with varying exceptional conditions (CEC 1.2).

- **Not Observed**
- **Emergent:** Candidate has a respect for learners with exceptional needs, but does not yet have consistent, well-formed knowledge of their abilities and behaviors.
- **Novice:** Candidate has a respect for learners with exceptional needs and has a solid, general knowledge of their abilities and behaviors.
- **Proficient:** Candidate has a respect for learners with exceptional needs and has a strong, specific knowledge of their abilities and behaviors.
- **Advanced Proficient:** Candidate capitalizes on the strengths of the learners' abilities to foster learning and is able to manage and modify challenging behaviors that are impeding student learning.

Additional (CEC 1.2) Comments: (If 'Not Observed' is selected please provide written explanation.)

Learning Environment

2. Candidate fosters safe, positive, and respectful classroom environment for all learners with varied exceptional needs (CEC 2).

- **Not Observed**
- **Emergent:** Candidate attempts to create a positive, respectful learning environment; inconsistencies in application.
- **Novice:** Candidate proactively considers how to create a positive, respectful learning environment; generally successful on a consistent basis.
- **Proficient:** Candidate, using specific knowledge of learner needs and abilities, consistently creates a learning environment that is respectful, safe, and encouraging.
- **Advanced Proficient:** Candidate is able to maintain a safe, positive, and respectful classroom environment and demonstrates classroom management skills to deescalate students that may be disrupting the safety of the classroom environment.

Additional (CEC 2) Comments: (If 'Not Observed' is selected please provide written explanation.)

Curricular Content Knowledge

3. Candidate uses knowledge of the general and specialized curricula to support learning for students with exceptionalities (CEC 3).

- **Not Observed**
- **Emergent:** Candidate attempts to create a positive, respectful learning environment; inconsistencies in application.
- **Novice:** Candidate proactively considers how to create a positive, respectful learning environment; generally successful on a consistent basis.
- **Proficient:** Candidate, using specific knowledge of learner needs and abilities, consistently creates a learning environment that is respectful, safe, and encouraging.
- **Advanced Proficient:** Candidate is able to maintain a safe, positive, and respectful classroom environment and demonstrates classroom management skills to deescalate students that may be disrupting the safety of the classroom environment.

Additional (CEC 3) Comments: (If 'Not Observed' is selected please provide written explanation.)

Assessment 4. Candidate uses assessment results to help plan the next steps in teaching and learning goals (CEC 4).

- **Not Observed**
- **Emergent:** Candidate does not draw on student learning data, in a consistent or context relevant manner to enhance next steps in teaching and learning.
- **Novice:** Candidate does attempt to use student learning data, but does not consistently and correctly apply it to teaching and learning.
- **Proficient:** Candidate does consistently, proactively, and consistently apply data results to inform plans for the next steps in teaching and learning.
- **Advanced Proficient:** Candidate conducts ongoing assessments and uses that data effectively in making instructional decisions for planning for teaching and learning.

Additional (CEC 4) Comments: (If 'Not Observed' is selected please provide written explanation.)

Instructional Planning and Strategies

5. Candidate selects, adapts, and uses instructional strategies that promote learning in general and special settings for exceptional learners (CEC 5).

- **Not Observed**
- **Emergent:** Candidate selects one or two general instructional strategies that may benefit the majority, but are not reflective of the specific needs of their exceptional learners.
- **Novice:** Candidate selects general instructional strategies and one or two more specific strategies to support exceptional learners in general.
- **Proficient:** Candidate selects both general instructional strategies and specific strategies, reflective of specific exceptional learner needs in the classroom, to support all.
- **Advanced Proficient:** Candidate cannot only select both general and instructional strategies for exceptional learners, but demonstrates the ability to adapt teaching strategies in the moment while providing instruction to assist learners in gaining the skills being taught.

Additional (CEC 5) Comments: (If 'Not Observed' is selected please provide written explanation.)

6. Candidate encourages independence, self-motivation, and self-direction for exceptional learners (CEC 5).

- **Not Observed**
- **Emergent:** Candidate does not consistently plan for and support application of independent, self-directed learning across content within a day (functional and academic).
- **Novice:** Candidate plans for the development of independent, self-directed learning, but lacks consistency in application across content within a day (functional and academic).
- **Proficient:** Candidate plans and supports independent, self-motivation, and self-direction, across the range of content within a day (functional and academic).
- **Advanced Proficient:** Candidate consistently demonstrates daily the ability to encourage exceptional learners to foster independence, self-motivations, and self-direction across the range of content being taught (functional and academic).

Additional (CEC 5) Comments: (If 'Not Observed' is selected please provide written explanation.)

7. Candidate uses augmentative, alternative and assistive tech to enhance communication for exceptional learners (CEC 5.3).

- **Not Observed**
- **Emergent:** Candidate underutilizes the available augmentative, alternative and assistive tech available to promote communication for exceptional learners.

- **Novice:** Candidate does consistently use, but does not attempt to innovate new uses of the augmentative, alternative and assistive technology available to enhance engaged communication of exceptional learners.
- **Proficient:** Candidate does consistently use, and attempts to innovate additional options with augmentative, alternative, and assistive technology to enhance engaged communication of exceptional learners.
- **Advanced Proficient:** Candidate does consistently uses augmentative, alternative, and assistive technology to engage communication of exceptional learners and demonstrates the capacity to collaborate with related service providers (i.e., speech-language pathologists) if there are modifications needed with devices and with parents/guardians on the consistent use of these communication methods.

Additional (CEC 5.3) Comments: (If 'Not Observed' is selected please provide written explanation.)

8. Candidate uses IEP goals and strategies as part of instructional planning in support of exceptional learners (CEC 5).

- **Not Observed**
- **Emergent:** Candidate is aware of IEP goals and strategies, but lacks full developed understanding of how to utilize these for support of exceptional learners.
- **Novice:** Candidate is aware of IEP goals and strategies, utilizing some in effective ways to support exceptional learners.
- **Proficient:** Candidate is aware of IEP goals and strategies, fully utilizing the appropriate points to support exceptional learners.
- **Advanced Proficient:** Candidate actively works toward IEP goals and consistently implements strategies as part of the instructional planning in support of exceptional learners. Candidate may also demonstrate the ability to collaborate with case managers (under supervision of their classroom teacher) on suggesting modifications to or new IEP goals for a learner.

Additional (CEC 5) Comments: (If 'Not Observed' is selected please provide written explanation.)

Professional Learning and Ethical Practice

9. Candidate recognizes that his or her attitude and behaviors can effect learners and the classroom environment (CEC 6).

- **Not Observed**
- **Emergent:** Candidate can articulate that a teacher's attitude and behavior can effect learners and the environment, but does not fully reflect about that in application to self.
- **Novice:** Candidate can articulate and reflect that his/her attitude and behavior can effect learners and the environment.
- **Proficient:** Candidate articulates, reflects, and can apply adjustments to his/her attitude and behaviors to positively support learners and the classroom environment.
- **Advanced Proficient:** Candidate demonstrates the ability to continually reflect on his/her attitude and behaviors that can effect learners in the classroom environment and is able to recognize and adjust his/her behavior in the moment when managing student behaviors.

Additional (CEC 6) Comments: (If 'Not Observed' is selected please provide written explanation.)

10. Candidate considers a learner's language, culture, family background, and exceptional condition and its role in teaching and learning (CEC 6.3).

- **Not Observed**
- **Emergent:** Candidate considers a learner's exceptional condition and its role in teaching and learning.
- **Novice:** Candidate considers a learner's language and exceptional condition and its role in teaching and learning.

- **Proficient:** Candidate considers a learner's language, culture, family background, and exceptional condition and its role in teaching and learning.
- **Advanced Proficient:** Candidate is able to demonstrate knowledge of a learner's language, culture, family background, and exceptional condition and its role in teaching when in meetings with parents or with school professionals. Additionally, the candidate may demonstrate the ability to seek out further knowledge of a learner's language, culture, family background, and exceptional condition through seeking out professional development workshops to attend or additional literature to read on the aforementioned areas that could impact the teaching and learning of the student.

Additional (CEC 6.3) Comments: (If 'Not Observed' is selected please provide written explanation.)

11. Candidate understands the CEC Code of Ethics and its application in support of their students with exceptionalities (CEC 6.1).

- **Not Observed**
- **Emergent:** Candidate understands that CEC has a code of ethics that informs teacher work and behavior in support of students in support of students with exceptionalities.
- **Novice:** Candidate understands the CEC Code of Ethics and considers how it applies to his/her own practice in support of students with exceptionalities.
- **Proficient:** Candidate understands and can reflect with specificity about their use of the CEC Code of Ethics in their practice in support of students with exceptionalities.
- **Advanced Proficient:** Candidate can apply the CEC Code of Ethics in their practice in support of students with exceptionalities when planning interventions. The candidate may demonstrate advocacy skills for students with exceptionalities that are in line with the CEC Code of Ethics.

Additional (CEC 6.1) Comments: (If 'Not Observed' is selected please provide written explanation.)

Collaboration

12. Candidate effectively integrates the support staff to enhance student learning (CEC 7).

- **Not Observed**
- **Emergent:** Candidate does not effectively plan for inclusion of support staff, but does informally include them in action.
- **Novice:** Candidate does plan for inclusion of support staff, but does not effectively share expectations for their inclusion in action.
- **Proficient:** Candidate does plan for and clearly shares expectations for the inclusion of support staff to enhance student learning.
- **Advanced Proficient:** Candidate demonstrates the ability to include and manage support staff in the classroom. Candidate may also demonstrate the ability to provide support or additionally training to support staff on instructional strategies or interventions that are appropriate for learners with exceptionalities to enhance their learning moment when managing student behaviors.

Additional (CEC 7) Comments: (If 'Not Observed' is selected please provide written explanation.)

Summary Brief summary of lesson and NJ Student Learning Standards addressed:

Strengths:

Identify strengths of the teacher candidate in any applicable area (dispositions, classroom management, lesson development, planning and assessment, student relationships, etc.)

Suggestions for Lesson Improvement:

Recommendations/Reflections for Professional Growth/Areas of Improvement:

Overall Assessment of Teacher Candidate in the Classroom

Please use all factors during your time with the teacher candidate to identify a level of performance of the teacher candidate in the classroom. It is important to note that the Clinical Experiences 1, 2 and 3 and the Clinical Practice 1 and 2 are a continuum. We expect to see growth over time for each teacher candidate. It is not the college's expectation that a first or second semester sophomore (Clinical Experience 1 or 2) will achieve the same level of performance as a second semester senior (Clinical Practice 2).

Any significant strengths or areas of improvement the teacher candidate can reflect upon should be included in the comment sections above.

If you have additional concerns or questions regarding the teacher candidate's performance in the classroom, please see the Clinical Placement Handbook for policies and procedures regarding a Clinical Placement Alert Form. The Clinical Placement Handbook can be found at <http://blogs.shu.edu/cear>.

- Emergent (1)
- Novice (2)
- Proficient (3)
- Advanced Proficient (4)

Information on the Grade for Clinical Placement

The final grade for Clinical Experience 1, 2 and 3 and for Clinical Practice 1 will be determined by the eleven competency/indicator evaluation scores earned by the teacher candidate. Following is the information and scoring for Pass, Pass with Remediation and Fail.

The policy for candidates earning a Failing score from either a cooperating teacher or clinical supervisor evaluation is explained in detail in the Clinical Placement Handbook.

Appendix 11: Clinical Competency Inventory (CCI) Evaluation v 3.4

Instructions and Overview

Introduction

This observational instrument has been designed to provide feedback on the progress of individual teaching candidates who are completing their clinical practice in their teacher preparation program. This performance-based assessment instrument measures key competencies aligned to the 2011 InTASC standards and the edTPA rubrics that are required of all teaching candidates prior to being recommended for certification. This standards-based observational instrument specifies the defining set of competencies that pre-service teachers should demonstrate before being recommended for certification in the State of New Jersey.

Some competencies may not be observable and usually start with the phrase, “Provides evidence of.” It is expected that the candidate will bring evidence of these competencies to a conference. It is the teacher candidate’s responsibility to bring a professional portfolio and additional artifacts to the final assessment conference.

The form is to be used as a summative assessment at the completion of clinical practice, during the last observation. It is used in conjunction with the Observation & Conference Report (O&C), a more qualitative observational form, which is aligned with the CCI and focuses on the quality of the specific lesson being observed. The CCI is meant to be a cumulative assessment of competencies that the supervisor and cooperating teacher have observed throughout the clinical practice. The form should be introduced at the beginning of the clinical practice to guide the development of the teacher candidate and to provide feedback on the candidate’s strengths and areas of improvement.

The procedure for using the CCI is as follows:

- 1) At the first visit, the supervisor will review the Observation Form and the CCI with the cooperating teacher.
- 2) Before the mid-term, the cooperating teacher and the supervisor observe the candidate together and fill out the Observation Form independently. They will discuss what behaviors they observed, discuss each of the 11 standards and specify areas of strength and areas that need improvement.
- 3) At mid-term, the supervisor and cooperating teacher fill in the CCI independently.
- 4) The supervisor will hold a mid-point conference with the teacher candidate to go over the CCI. The cooperating teacher will join this conference to discuss mid-point assessment, when possible.
- 5) The supervisor and cooperating teacher should do at least one more common observation together prior to the final session and fill in the Observation Form independently.
- 6) At the completion of the field placement, the supervisor and cooperating teacher fill in the CCI independently and enter the final assessment.
- 7) At the completion of the clinical practice, the teaching candidate will do a self-assessment and fill in the CCI.

Rating of the Form

The following rating scale will be used to score each candidate with a required benchmark of 3.0 on the final for a candidate to be recommended for certification.

4: Advanced Proficient (Exemplary Practice) – Consistently demonstrates all the skills and behaviors and/or evidence required for each competency outlined in Advanced Proficient for a specific indicator on the CCI. The teacher candidate shows exemplary practice in: 1) integrating content knowledge with application; 2) lesson planning and implementation of daily instruction; 3) organizational and classroom management skills; 4) using assessment to inform instruction; and 5) adapting instruction to meet the needs of all children. Recommended point value: 4.0 - 3.5

3: Proficient (Basic Competence) – Consistently demonstrates most of the skills and behaviors and/or evidence required for the competencies outlined in Advanced Proficient for a specific indicator on the CCI.

The teacher candidate shows basic competence in: 1) integrating content knowledge with application; 2) lesson planning and implementation of daily instruction; 3) organizational and classroom management skills; 4) using assessment to inform instruction; and 5) adapting instruction to meet the needs of all children. Recommended point value: 3.4 - 2.75

2: Novice (Limited Competence) – Demonstrates some of the skills and behaviors and/or evidence required for the competencies outlined in Advanced Proficient for a specific indicator on the CCI.

The teacher candidate continues to need assistance in: 1) integrating content knowledge with application; 2) lesson planning and implementation of daily instruction; 3) organizational and classroom management skills; 4) using assessment to inform instruction; and 5) adapting instruction to meet the needs of all children. Recommended point value: 2.74 – 1.5

1: Emergent (Exhibits Difficulty) – Demonstrates few of the skills and behaviors required for competencies outlined in Advanced Proficient for a specific indicator on the CCI.

The teacher candidate exhibits difficulty in: 1) integrating content knowledge with application; 2) lesson planning and implementation of daily instruction; 3) organizational and classroom management skills; 4) using assessment to inform instruction; and 5) adapting instruction to meet the needs of all children. Recommended point value: 1.4 - 0

Not Observed – *This is only to be used on the midterm CCI.* If you did not observe a specific indicator in the classroom, please obtain additional evidence from the clinical intern demonstrating competency in that area. If you have a question or reservation about an indicator, please insert a comment explaining your concerns.

Please note the 'Not Observed' indicator is ONLY used at the midterm. The evaluator should indicate on the form which indicators were observed for the lesson and should write additional comments in the space provided. By the final observation, an evaluation level must be entered for each criteria and 'Not Observed' cannot be used. The teacher candidate can offer other evidence to show competency in categories that were not directly observed in their setting.

The CCI is used at the midterm to set goals for the teacher candidate for the remainder of Clinical Practice 2, allow for reflection by the teacher candidate and be the basis for both the midterm and final conference with the teacher candidate, cooperating teacher and clinical supervisor. In order to pass clinical practice and be recommended for certification, a teacher candidate must score a 3.0 or higher on the CCI at the final (eighth) observation. The purpose of the midterm CCI is to pinpoint areas for improvement before the Final CCI. Please let your clinical intern know that if they have not yet reached 102 points or higher, they should discuss with you those areas that need improvement. 102 points or higher are required for the Final CCI only.

The following scale is helpful in assessing the candidate (this scale will not be accurate if you mark any item as 'Not Observed'): Advanced Proficient (4) = 136 points; Proficient (3) = 102 points; Novice (2) = 68 points; Emergent (1) = 34 points.

When all indicators are scored on the CCI Final, a teacher candidate needs at least 102 points (3.0 average) to be recommended for certification.

Evaluator

- ☐ Cooperating Teacher
- ☐ SHU Field Supervisor
- ☐ Candidate Self Reflection

Date of Observation: _____

Supervisor Name:

First Name _____

Last Name _____

Candidate Name:

First Name _____

Last Name _____

Cooperating Teacher Name:

First Name _____

Last Name _____

Candidate Email: (Please enter the candidate's **Seton Hall** email, e.g. "Elizabeth.Seton@student.shu.edu")

Email Address _____

Verify Email Address _____

Candidate Program within Educational Studies:

If the candidate is SCED, CEAS/SCED, or SCED/SSSED, please indicate the specific program:

- ☐ English
- ☐ Math
- ☐ Social Studies
- ☐ Science
- ☐ Music
- ☐ Art
- ☐ World Language
- ☐ Media/Digital Research

School (of placement):

Grade Level (of placement):

Subject (placement):

- ☐ English
- ☐ Math
- ☐ Social Studies
- ☐ Science
- ☐ Music
- ☐ Art
- ☐ French
- ☐ Italian
- ☐ Spanish
- ☐ Media/Digital Research
- ☐ Other

Standard #1: Learner Development

The clinical intern shall understand how learners grow and develop, recognizing that patterns of learning and development vary individually within and across the cognitive, linguistic, social, emotional, and physical areas, and designs and implements developmentally appropriate and challenging learning experiences.

1.1 The clinical intern designs and implements lessons that are developmentally appropriate so that all learners can learn.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern's lessons:</p> <ul style="list-style-type: none"> • Contain objectives and activities that are at the appropriate developmental level for individual and groups of learners (neither too hard nor too easy); • Accommodates individual developmental differences in the instructional activities by differentiating instruction; • Take into account each learners' background knowledge, and builds on their personal, cultural, family and community assets, strengths and needs; • Are cognitively challenging for all learners; • Are directly aligned to standards. 	<p>The clinical intern's lessons:</p> <ul style="list-style-type: none"> • Contain objectives and activities that are at the appropriate developmental level for all learners (neither too hard nor too easy); • Address individual developmental differences in the instructional activities by differentiating instruction; • Take into account learners' background knowledge, and builds on their personal, cultural, family and community assets, strengths and needs; • Are cognitively challenging for all learners; • Are aligned to standards. 	<p>The clinical intern's lessons:</p> <ul style="list-style-type: none"> • Contain some objectives and activities that are at the appropriate developmental level for all learners (some are too hard or too easy); • Contain objectives that are not written; • Show some effort to differentiate instruction but needs improvement; • Are loosely aligned to standards. 	<p>The clinical intern's lessons:</p> <ul style="list-style-type: none"> • Contain activities that are not at the appropriate developmental level for all learners (they are either too hard or too easy); • Contain objectives that are not written correctly; • Are not cognitively challenging; • Are not aligned to standards. 	

1.2 The clinical intern interacts with learners in an appropriate manner with sensitivity to cognitive, cultural, developmental, emotional, linguistic, physical, and social differences.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern interacts with learners in a manner that:</p> <ul style="list-style-type: none"> • Acknowledges developmental and cognitive differences of all learners in the learning environment through implementation of supportive discourse and accommodations; • Encourages intentional academic conversation and differentiates for linguistic and developmental differences in language development; • Honors the emotional, physical, social, and cultural differences of all learners; • Respects all learners in the learning environment through verbal and nonverbal interactions. 	<p>The clinical intern interacts with learners in a manner that:</p> <ul style="list-style-type: none"> • Encourages academic conversation and differentiates for linguistic and developmental differences in language development; • Honors emotional, physical, social, and cultural differences of all learners; • Respects all learners in the learning environment through verbal and nonverbal interactions. 	<p>The clinical intern interacts with learners in a manner that:</p> <ul style="list-style-type: none"> • Uses academic conversation at times; • Respects cultural differences of most learners; • Tries to establish a supportive environment through verbal and nonverbal interactions but needs some feedback. 	<p>The clinical intern interacts with learners in a manner that:</p> <ul style="list-style-type: none"> • Shows limited sensitivity to cultural and academic differences of students; • Shows limited awareness of verbal and nonverbal messages being sent to students in the learning environment. 	

Standard 1 (Learner Development) Comments:

Standard #2: Learning Differences

The clinical intern uses understanding of individual differences and diverse cultures and communities to ensure inclusive learning environments that enable each learner to meet high standards.

2.1 The clinical intern designs and implements instruction to ensure an inclusive learning environment where individual needs and differences are respected and met.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern's lessons include:</p> <ul style="list-style-type: none"> • Developmentally appropriate activities that accommodate individual differences of learners and allows them to succeed; • Strategies that 	<p>The clinical intern's lessons include:</p> <ul style="list-style-type: none"> • Many activities that differentiate the delivery of instruction based on needs of learners; • Strategies that support a learning 	<p>The clinical intern's lessons:</p> <ul style="list-style-type: none"> • Try to support a learning environment that allows all students to succeed, but needs to include more individualized 	<p>The clinical intern's lessons:</p> <ul style="list-style-type: none"> • Provide the same strategies for all students and not taking into account learning differences. 	

differentiate the delivery of instruction based on prior knowledge and experiences of all learners; • Assessments that are differentiated to allow each learner to demonstrate their understanding of content.	environment that allow all students to succeed; • Assessments that accommodate the needs of all learners.	accommodations for learners.		
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2.2 The clinical intern reflects upon their own personal biases and as a result thoughtfully includes diverse cultures, communities, and perspectives into the lesson.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern reflects on their own personal biases and engages in meaningful lessons that:</p> <ul style="list-style-type: none"> • Reflect the diversity of students, their families, culture and communities; • Incorporate students' interests and cultural heritage; • Analyze content that addresses cultural issues relevant to students' identity and provides opportunities for student engagement and exploration; • Relate content from various perspectives to inform students that history and current events can be seen through multifaceted lens; • Foster an inclusive learning community with clear and explicit guidelines and shared expectations; 	<p>The clinical intern reflects on their own personal biases and engages in meaningful lessons that:</p> <ul style="list-style-type: none"> • Reflect the diversity of students, their families, and their communities; • Incorporate students' interests and cultural heritage; • Illustrate and discuss content that addresses cultural issues relevant to students' identity; • Establish an inclusive learning community with clear and explicit guidelines and expectations. 	<p>The clinical intern engages in activities that:</p> <ul style="list-style-type: none"> • Focus on holidays and peripheral content related to students' cultural backgrounds; • Incorporate students' cultural heritage. 	<p>The clinical intern engages in activities that:</p> <ul style="list-style-type: none"> • Lack sensitivity to the diversity of students, families, or the surrounding community; • Are devoid of any diverse content or perspective. 	

2.3 The clinical intern creates a learning community where individual language development needs and differences are respected and met (e.g., ELL, ASL, other).

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern:</p> <ul style="list-style-type: none"> • Supports learners through individualized and differentiated language development strategies; • Provides learners with vocabulary reinforcement and modifications; • Encourages learners to engage in discussions at levels consistent with the learners' current language proficiency level; • Uses varied and differentiated language strategies to support learners. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Supports learners in language development; • Provides learners with vocabulary reinforcement; • Encourages learners to engage in discussions at levels consistent with learners' current language proficiency level; • Uses language strategies to support learners. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Engages in discussions that are at appropriate levels of the learners' language proficiency, and involve more than one-word responses; • Occasionally uses language strategies to support learners; • Provides rudimentary support to learners in language development. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Engages learners in limited one-word responses most of the time; • Does not provide any accommodations to learners' language proficiency; • Struggles to provide academic support to the learners' language proficiency level. 	

Standard 2 (Learning Differences) Comments:

Standard #3: Learning Environment

The clinical intern works with others (learners, families and colleagues) to create environments that support individual and collaborative learning, and that encourage positive social interaction, active engagement in learning, and self-motivation.

3.1 The clinical intern demonstrates general warmth, caring and respect towards learners through verbal/nonverbal communication.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
The clinical intern: <ul style="list-style-type: none"> • Listens carefully to individual perspectives of learners; • Responds respectfully to learners from all cultures and communities; • Gives learners a chance to answer with adequate wait time; • Shows warmth and caring in tone and actions; • Fosters positive social interactions among all members of the learning community, including families. 	The clinical intern: <ul style="list-style-type: none"> • Listens carefully to individual perspectives of learners; • Responds respectfully to learners from all cultures and communities; • Gives learners a chance to answer with adequate wait time; • Shows a warmth and caring in tone and actions. 	The clinical intern: <ul style="list-style-type: none"> • Listens carefully to learners; • Responds respectfully; • Responds neutrally in tone. 	The clinical intern: <ul style="list-style-type: none"> • Does not listen carefully to learners; • Does not demonstrate a caring attitude. 	

3.2 Through collaboration with students, colleagues, and families, the clinical intern uses a variety of effective management techniques in the learning environment.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
The clinical intern manages the class by: <ul style="list-style-type: none"> • Collaboratively developing and enforcing effective routines and guidelines; • Engaging in positive and supportive teacher-student interactions and fostering effective student-student interactions; • Creating a positive, low risk learning environment that promotes mutual respect among students; • Implementing smooth transitions; • Effectively implementing a variety of groupings and activities that foster individual and collaborative learning; • In consultation with the cooperating teacher, communicates, when appropriate and possible, with families for effective management of the learning environment. 	The clinical intern manages the class by: <ul style="list-style-type: none"> • Enforcing effective routines and guidelines; • Engaging in positive and supportive student-teacher interactions and fostering student-student interactions; • Creating a positive, low risk learning environment that promotes mutual respect among students. 	The clinical intern manages the class by: <ul style="list-style-type: none"> • Developing effective routines and guidelines; • Engaging in positive and supportive student-teacher interactions. 	The clinical intern struggles with management techniques and enforcing routines and guidelines.	

3.3 Learners are actively participating and engaged in the lesson.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
Learners are highly engaged in the lesson by: <ul style="list-style-type: none"> • Applying the content through hands-on activities; • Discussing and actively participating through further developing peers' responses; • Displaying interest, enthusiasm, and self-motivation; • Being actively engaged in independent and collaborative lesson activities 	Learners are engaged in the lesson by: <ul style="list-style-type: none"> • Applying the content through hands-on activities; • Discussing and actively participating; • Displaying interest, enthusiasm, and self-motivation. 	Learners are somewhat engaged in the lesson by: <ul style="list-style-type: none"> • Discussing; • Participating; • Raising their hands; • Paying attention during the class activity. 	Learners are not engaged in the lesson: <ul style="list-style-type: none"> • Learners are distracted and not paying attention. 	

3.4 Learners are engaged in positive peer relationships through instructional activities.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
Learners are: <ul style="list-style-type: none"> • Collaborating with peers in challenging and relevant activities; • Actively discussing with peers; • Coaching/mentoring a peer; • Consistently engaged in positive peer interactions; • Positively supporting each other's cognitive, cultural, developmental, emotional, linguistic, physical, and social differences. 	Learners are: <ul style="list-style-type: none"> • Collaborating with peers; • Actively discussing with peers; • Coaching/mentoring a peer; • Engaged in positive peer interactions. 	Learners need to: <ul style="list-style-type: none"> • Collaborate with peers frequently; • Actively discuss with peers. 	There is very little collaboration taking place in the lesson, which would enhance positive peer relationships.	

Standard 3 (Learning Environment) Comments:

Standard #4: Content Knowledge

The clinical intern understands the central concepts, tools of inquiry, and structures of the discipline(s) they teach and creates learning experiences that make these aspects of the discipline accessible and meaningful for learners to assure mastery of the content.

4.1 The clinical intern designs and implements lessons that demonstrate knowledge and command of the subject matter.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern:</p> <ul style="list-style-type: none"> • Relates content to prior student knowledge; • Uses effective explanations of key disciplinary concepts; • Uses teaching strategies that foster the understanding of key disciplinary concepts that meets the needs of all learners; • Demonstrates a deep and broad command of the subject matter; • Incorporates the appropriate standard(s) in the lessons; • Teaches the disciplinary vocabulary words associated with the content; • Makes the content accessible and relevant to the experiences, prior knowledge, and background of all learners. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Relates content to prior student knowledge; • Uses effective explanations of key disciplinary concepts; • Uses teaching strategies that foster the understanding of key disciplinary concepts; • Demonstrates a deep and broad command of the subject matter; • Incorporates the appropriate standard(s) in the lessons; • Makes the content relevant to everyday life and experiences of the learner. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Uses teaching strategies that foster the understanding of key disciplinary concepts; • Demonstrates a rudimentary command of the subject matter; • Incorporates appropriate standard(s) in the lessons. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Lacks command of the subject matter; • Has not consistently aligned the lesson with any standards; • Has provided limited meaningful context to help learners understand why it is necessary and important to learn the content. 	

4.2 The clinical intern designs and implements lessons that allow learners to demonstrate development of critical thinking and problem solving within the content area.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>Learners demonstrate the development of their critical thinking and problem-solving skills within the content area through:</p> <ul style="list-style-type: none"> • Responses to higher order thinking questions raised by the clinical intern; • Questions generated by the learners that demonstrate critical thinking skills; • Activities and strategies that engage them in relevant and meaningful critical thinking and problem solving activities related to their own background; • Their ability to apply key concepts in the discipline to the learners' own experiences; • Responses written and/or oral to critical thinking and problem solving assignments. 	<p>Learners demonstrate the development of their critical thinking and problem-solving skills within the content area through:</p> <ul style="list-style-type: none"> • Responses to higher order thinking questions raised by the clinical intern; • Activities and strategies that engage them in relevant and meaningful critical thinking and problem solving in the content area; • Responses written and oral to critical thinking and problem solving assignments. 	<p>Learners need to develop further their critical thinking and problem solving skills within the content area by the clinical intern providing:</p> <ul style="list-style-type: none"> • More activities and strategies to engage learners in critical thinking and problem solving in the content area; • More activities and strategies to encourage learners to think critically and solve problems. 	<ul style="list-style-type: none"> • Activities are very low level and do not push the learners to problem solve or think critically. 	

4.3 The clinical intern integrates reading, writing, speaking and listening.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern:</p> <ul style="list-style-type: none"> • Uses-resources from a variety of diverse perspectives to teach literacy in the content areas; • Stresses comprehension of text through strategy instruction; • Facilitates rich text-based discussions and/or writing through specific, thought-provoking questions about the content; • Uses age appropriate strategies that promote learners' literacy development in the content areas; • Focuses instruction equally on narrative and informational text that relates to students' interests and background experiences. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Uses a variety of resources to teach literacy in the content areas; • Stresses comprehension of text; • Facilitates rich text-based discussions and/or writing; • Uses age appropriate literacy strategies to promote learners' literacy development in the content areas; • Focuses instruction equally on narrative and informational text.. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Tends to use limited resources to teach literacy in the content areas; • Tends not to stress comprehension; • Should incorporate more age-appropriate literacy strategies; • Should incorporate more text-based discussions and writing to reinforce literacy. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Does not use a variety of resources to teach literacy in the content areas; • Rarely emphasizes comprehension; • Does not use age-appropriate content-specific literacy strategies. 	

Standard 4 (Content Knowledge) Comments:

Standard #5: Application of Content

The clinical intern understands how to connect concepts and use differing perspectives to engage learners in critical thinking, creativity, and collaborative problem solving related to authentic local and global issues.

5.1 The clinical intern implements learning experiences that allow learners to integrate knowledge from several content areas that reflect a diverse perspective within the curriculum.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern implements learning experiences that:</p> <ul style="list-style-type: none"> • Are meaningful and connect the content to concepts, issues and relevant ideas from other content area(s); • Actively engage learners in applying concepts and ideas from their own background to the topic being discussed or 	<p>The clinical intern implements learning experiences that:</p> <ul style="list-style-type: none"> • Connect the content to concepts, issues and relevant ideas from other content area(s); • Have learners actively engaged in applying concepts and 	<p>The clinical intern's lessons:</p> <ul style="list-style-type: none"> • Tend to focus on one content area only with little connection to other disciplines; • Have learners engaged in applying concepts and ideas from another content 	<p>The clinical intern focuses solely on one content area with no connection to other disciplines, and does not provide any opportunity for learners to apply concepts and ideas.</p>	

studied; <ul style="list-style-type: none"> Provide opportunities for learners to use interdisciplinary concepts to help solve problems. 	ideas from their own background and other content areas.	area.		
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5.2 The clinical intern implements learning experiences that allow learners to apply content knowledge to solve real world problems through collaboration.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
Learners are actively involved in: <ul style="list-style-type: none"> Exploring and/or researching different alternatives and perspectives to solving a problem; Working collaboratively in a group; Applying content knowledge to solving a problem; Using critical thinking and creativity to generate new ideas and novel approaches to solving a problem. 	Learners are actively involved in: <ul style="list-style-type: none"> Exploring and/or researching different alternatives and perspectives to solving a problem; Working collaboratively in a group; Applying content knowledge to solving a problem. 	<ul style="list-style-type: none"> Learners are working predominantly from a single resource and occasionally working collaboratively in a group; There is little evidence learners are trying to solve real world problems. 	<ul style="list-style-type: none"> Learners are working exclusively from a single resource, or answering lower level questions; There is no group collaboration nor are learners solving real world problems. 	

5.3 Learners use current resources that reflect diverse perspectives for content exploration, which includes technological applications.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
Learners are: <ul style="list-style-type: none"> Using a wide variety of diverse resources including technology to explore different perspectives on the content being studied and to help solve a problem; Engaged in discovering and integrating new perspectives and knowledge in the exploration/research of the content; Using current events and technological applications for exploration and research of the content. 	Learners are: <ul style="list-style-type: none"> Using a variety of diverse resources including technology to explore perspectives and content to help solve a problem; Engaged in discovering new resources available for the exploration of the content; Using current events and technological resources for content exploration. 	Learners are using a few different resources such as laptops and books for content research.	Learners are only using a single resource to explore the content. There is little technology integration or use of varied resources if technology is not available.	

5.4 Learners apply their content knowledge through a variety of forms such as oral, written, and/or technological presentations.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>Learners apply their content knowledge by:</p> <ul style="list-style-type: none"> Telling a story, recounting an experience or reporting on a topic, with appropriate sequencing of ideas and using appropriate facts and details; Engaging in collaborative discussions; Presenting their ideas in a variety of ways including drawings, hands-on projects, multimedia presentations, group presentations. 	<p>Learners apply their content knowledge by:</p> <ul style="list-style-type: none"> Telling a story, recounting an experience or writing on a topic; Engaging in collaborative discussions; Presenting their ideas/research in a variety of ways. 	<p>Learners predominantly apply their content knowledge through written reports, oral presentations and tests. More varied presentations with use of technology, if available, is recommended.</p>	<p>Learners apply their content knowledge through writing and quizzes or tests. There is little variety in terms of how they present their knowledge.</p>	

5.5 Learners are engaged in literacy activities within content areas.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>Learners are engaged in:</p> <ul style="list-style-type: none"> Reading a variety of diverse informational texts; Using comprehension strategies to help make meaning; Comparing concepts on the same theme and drawing conclusions; Writing about and/or discussing the content using evidence from the text to support ideas; Learning content vocabulary; Listening to others' research and/or presentations and commenting on it. 	<p>Learners are engaged in:</p> <ul style="list-style-type: none"> Reading a variety of diverse informational texts; Comparing multiple sources of texts; Using comprehension to help make meaning; Writing about the content area; Learning vocabulary; Listening to others' research and/or presentations. 	<ul style="list-style-type: none"> Learners are mostly reading the same textbook and a few supplemental resources; The learners are writing essays that are based on textbook readings and some outside sources; The learners are learning the vocabulary words from the textbook and writing essays about topics from the textbook. 	<ul style="list-style-type: none"> Learners are using their textbook only and using it as the primary source for learning the content. The learners are not being taught about how to comprehend informational text nor how to draw evidence from the text to support answers. 	

5.6 Learners are engaged in inclusive and relevant activities that promote and value the development of quantitative reasoning within content areas.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
Learners are engaged in: <ul style="list-style-type: none"> • Interpreting visual representations that are appropriate to the content; • Using concrete examples and manipulatives to solve problems, when appropriate; • Applying mathematical modeling/reasoning to explore the content area; • Exploring quantitative reasoning when reading a variety of diverse resources; • Discussing the value of quantitative reasoning to different content areas such as the arts; • Collaborative problem solving. 	Learners are engaged in: <ul style="list-style-type: none"> • Interpreting visual representations related to the content; • Using concrete examples in mathematics to solve problems; • Exploring quantitative reasoning when reading a variety of resources; • Discussing the value of quantitative reasoning; • Working in groups to problem solve. 	Learners use quantitative reasoning occasionally to explore a content area, especially science; <ul style="list-style-type: none"> • Little effort is made to have learners explore quantitative reasoning in other fields, such as English/Language Arts or Social Studies 	Learners are engaged in quantitative reasoning in mathematics lessons only; <ul style="list-style-type: none"> • There is not any integration into any other content area. 	

Standard 5 (Application of Content) Comments:

Standard #6: Assessment

The clinical intern understands and uses multiple methods of assessment to engage learners in their own growth, to monitor learner progress, and to guide the clinical intern's and learner's decision making.

6.1 The clinical intern designs appropriate formative and summative assessments that are aligned with learning objectives.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
The lesson plans contain: <ul style="list-style-type: none"> • A clear assessment strategy for how each objective will be evaluated; • Rubrics and/or criteria that are designed specifically for each objective; • Multiple formative assessments that are built into the lesson to monitor learners' progress and inform instruction; 	The lesson plans contain: <ul style="list-style-type: none"> • An assessment to evaluate each objective; • A rubric that is designed to measure objectives; • A few formative assessments that monitor learners' progress; • A benchmark for measuring achievement. 	The lesson plans contain: <ul style="list-style-type: none"> • A general assessment to evaluate the students; • General rubrics, which need more specific criteria and alignment with the objectives/outcome s; • A few formative assessments to monitor learners' 	The lesson plans contain a very general method of assessment that tends to be predominantly quizzes and tests.	

<ul style="list-style-type: none"> • A measure or method of collecting data for each objective; • A benchmark for measuring achievement for each objective. 		progress.		
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6.2 The clinical intern provides meaningful and specific feedback to learners to improve their learning.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern:</p> <ul style="list-style-type: none"> • Uses assessment data to differentiate instruction based on learners' needs; • Uses assessment data to provide feedback to learners in a positive manner; • Targets the feedback on specific objectives to help increase achievement; • Works with learners to help them understand their own performance and if possible, establish their own learning goals; • Provides continuous feedback to learners regarding their future learning goals. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Uses assessment data to provide feedback to learners in a positive manner; • Works with learners to help them understand their own performance; • Provides feedback to learners on a continual basis. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> • Provides feedback to learners in a positive manner • Works with learners to help them understand their own performance. 	<p>The clinical intern provides minimal feedback to the learners</p>	

Standard 6 (Assessment) Comments:

Standard #7: Planning for Instruction

The teacher plans instruction that supports every learner in meeting rigorous learning goals by drawing upon knowledge of content areas, curriculum, cross-disciplinary skills, and pedagogy, as well as knowledge of learners and the community context.

7.1 The clinical intern selects a variety of appropriate instructional materials and resources to meet the needs of all learners.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The instructional materials and resources used in the lessons:</p> <ul style="list-style-type: none"> • Are well chosen to meet the lesson objectives; • Develop meaningful and deep learning of the content and foster a deep appreciation of different cultures; • Meet the needs of all learners including struggling readers and English Language 	<p>The instructional materials and resources used in the lessons:</p> <ul style="list-style-type: none"> • Are well chosen to meet the lesson objectives; • Meet the needs of all learners including struggling readers 	<p>The instructional materials and resources used in the lessons rely predominantly on the textbook and a few supplemental sources of material. A variety of resources are not used and/or the</p>	<p>The textbook is used as the only source of material.</p>	

Learners; <ul style="list-style-type: none"> Are at appropriate developmental and reading levels to foster an interest in learning for all learners; Are a variety (print, video, technology, primary sources, manipulatives). 	and English language learners; <ul style="list-style-type: none"> Are a variety (print, video, technology, primary sources, manipulatives) other than just the textbook. 	resources do not meet the needs of all learners.		
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7.2 The clinical intern models and integrates technology using a variety of modalities into the lesson plan to promote effective learning for all learners.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
The intern implements technology that: <ul style="list-style-type: none"> Promotes meaningful and deep learning; Involves the learners who are engaged in using the technology; Is integral to the learning activities; Models and applies technology standards to improve learning; Provides interest and meaning to the learning activities; Designs authentic learning activities; Utilizes various modalities in teaching. 	The intern implements technology that: <ul style="list-style-type: none"> Promotes meaningful learning; Involves the learners who are engaged in using the technology; Provides interest and meaning to the learning activities; Attempts to use various modalities in teaching. 	Technology is predominantly presentations and learners are not engaged in using the technology.	There is little or no technology integration in the lessons.	

7.3 The clinical intern designs and implements effective lessons that follow a carefully sequenced development of rigorous learning goals.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
The lessons contain: <ul style="list-style-type: none"> Clear and appropriately written objectives that are aligned to standards; A well-constructed introduction including a motivating hook and development of background knowledge; A solid procedure that engages the learner in meaningful and cognitively challenging activities; A solid conclusion where learners draw conclusions from the material and the clinical intern reviews key concepts; 	The lessons contain: <ul style="list-style-type: none"> Appropriately written objectives aligned to standards; A good introduction which may include a motivating hook and/or development of background knowledge; A good procedure including engaging activities; A good conclusion that might include a summary and wrap-up of concepts; An assessment of what was learned. 	The lessons are not well organized and need a more carefully sequenced development. The lessons do not contain all the elements of a well-constructed lesson plan, missing one of the following: a solid introduction with a motivating hook, a procedure with meaningful learning activities, a good conclusion, and/or assessment of the	The lessons are not effectively organized and missing several components of a well-constructed lesson plan.	

<ul style="list-style-type: none"> Multiple assessments of what was learned including the collection of data (quiz results, a rubric score, a checklist score). 		objectives.		
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7.4 The clinical intern's unit has lessons that build on each other to support learning of the essential strategy with clear connections to skills.

Advanced Proficient	Proficient	Novice	Emerging	Not Observed
<p>The unit:</p> <ul style="list-style-type: none"> Contains a clearly organized and sequential development of content, skills and knowledge to support student learning; Shows clear connections to developmental and pedagogical theory; Has clear connections to skills; Is developmentally appropriate for the target audience; Builds on learners' prior knowledge and prerequisite skills and knowledge. 	<p>The unit:</p> <ul style="list-style-type: none"> A somewhat organized and sequential development of content, skills and knowledge to support student learning; Connections to skills and theory; Is developmentally appropriate for the target audience; Addresses learners' prior knowledge. 	<p>The unit:</p> <ul style="list-style-type: none"> Is out of balance in terms of sequence and development of content, skills, and knowledge; Needs more definite connection to theory; Is developmentally appropriate for the target audience. 	<p>The unit:</p> <ul style="list-style-type: none"> Is not well sequenced; Needs more definite connection to skills and theory; Is not developmentally appropriate for the target audience. 	

Standard 7 (Planning for Instruction) Comments:

Standard #8: Instructional Strategies

The clinical intern understands and uses a variety of instructional strategies to encourage learners to develop deep understanding of content areas and their connections, and to build skills to apply knowledge in meaningful ways.

8.1 The clinical intern uses effective questions to facilitate deep understanding of content (i.e., higher order thinking).

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern models and uses a variety of questions throughout the lessons that:</p> <ul style="list-style-type: none"> Challenge learners cognitively (why, what if, and how questions); Advance high-level thinking and complex discourse; Address how the text works (asks questions about text structure, author's purpose, writing style, theme, use of language, etc.); 	<p>The clinical intern models and uses a variety of questions throughout the lessons that:</p> <ul style="list-style-type: none"> Challenge learners cognitively (why, what if, and how questions); Advance high-level thinking and discourse; Ask learners about vocabulary words; Use appropriate 	<p>The clinical intern asks questions throughout the lessons that:</p> <ul style="list-style-type: none"> Often are "yes" or "no" questions; Ask learners about vocabulary words; Do not use correct academic language for the discipline 	<p>The clinical intern does not ask enough questions throughout the lesson and the questions that are posed are simple recall questions.</p>	

<ul style="list-style-type: none"> • Ask learners about vocabulary; • Use appropriate academic language for the discipline. 	academic language for the discipline.			
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8.2 The clinical interns vary their role in the instructional process in relation to the content (e.g., instructor, facilitator, coach, and participant).

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern engages in a variety of instructional activities that require different teacher-student interactions, such as:</p> <ul style="list-style-type: none"> • Direct instruction to individual, group, and/or full class; • Facilitator and/or coach to small groups or individual learners; • Modeling for demonstration of new skills/processes; • Being a participant during learner presentations. 	<p>The clinical intern engages in a variety of instructional activities that require different teacher-student interactions, such as:</p> <ul style="list-style-type: none"> • Direct instruction to individual, small group, and/or full class; • Facilitator and/or coach to small groups or individual learners; • Being a participant during learner presentations. 	<p>The clinical intern engages in only a few different teacher-student interactions, with the predominant role being direct instruction to the full class.</p>	<p>The clinical intern engages in direct instruction only without varying their role during the lesson.</p>	

8.3 The clinical intern models metacognitive processes to support comprehension of content for every learner.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern uses the following metacognitive strategies to develop deeper understanding of text/content:</p> <ul style="list-style-type: none"> • Models how to apply a specific strategy/skill before having students practice or apply it; • Articulates own thought processes when using the strategy/skill; • Asks learners to think about and explain the strategies they are using to understand text and/or content. 	<p>The clinical intern uses the following metacognitive strategies to develop deeper understanding of text/content:</p> <ul style="list-style-type: none"> • Models how to apply a specific strategy/skill before having learners practice or apply it; • Articulates own thought processes when using the strategy/skill. 	<p>The clinical intern occasionally models a strategy or skill and does a brief explanation.</p>	<p>The clinical intern provides limited explanation and modeling of a skill before having the learners apply it.</p>	

8.4 The clinical intern/learners use(s) instructional time effectively to achieve learning outcomes.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern uses allotted time to:</p> <ul style="list-style-type: none"> Keep learners on-task with cognitively challenging activities; Minimize time for transitions; Engage learners in achieving learning outcomes; Implement an effective lesson with clear and measurable objectives, an introduction, challenging activities, and summary; Assess the learning outcomes; Monitor and adjust lessons according to formative assessment, time constraints, and learners' needs. 	<p>The clinical intern uses allotted time to:</p> <ul style="list-style-type: none"> Keep learners on-task; Minimize time for transitions; Engage learners in achieving learning outcomes; Implement an effective lesson with an introduction, activities, and summary; Assess the learning outcomes; Monitor and adjust lessons according to formative assessment and time constraints. 	<p>The clinical intern uses allotted time to:</p> <ul style="list-style-type: none"> Implement a lesson with an introduction, activities, and summary; Assess the learning outcomes. 	<p>The clinical intern does not use allotted time effectively to implement an effective lesson and assess the learning outcomes.</p>	

Standard 8 (Instructional Strategies) Comments:

Standard #9: Professional Learning and Ethical Practice

The clinical intern engages in ongoing professional learning and uses evidence to continually evaluate their practice, particularly the effects of their choices and actions on others (learners, families, other professionals, and the community), and adapts practice to meet the needs of each learner.

9.1 The clinical intern provides evidence of reflection on improvement of professional practice in content area(s) and pedagogy.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern reflects on:</p> <ul style="list-style-type: none"> How lessons can be improved; Specific recommendations for future improvement related to standards; Changes that address learners' collective learning needs related to the central focus of a unit using principles from research and/or theory; Examples of how they considered learners' needs, interests, and skills; 	<p>The clinical intern reflects on:</p> <ul style="list-style-type: none"> How lessons can be improved; Recommendations for future improvement related to standards; Changes to clinical intern practice that are related to student learning 	<p>The clinical intern provides a brief reflection on:</p> <ul style="list-style-type: none"> How lessons can be improved; Changes to clinical intern practice that are superficially related to student learning needs; A few 	<p>The clinical intern provides limited reflection on improvement of professional practice.</p>	

<ul style="list-style-type: none"> • How they can improve their own practice through professional development; • How choices impact others (learners, families, other professionals and the community). 	needs; <ul style="list-style-type: none"> • Examples of how they considered learners' needs, interests, and skills. 	recommendations for future growth.		
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9.2 The clinical intern provides evidence of maintaining and analyzing accurate learner records.

Advanced Pproficient	Proficient	Novice	Emergent	Not Observed
The clinical intern provides evidence of: <ul style="list-style-type: none"> • Records with learners' assessment scores; • Analysis of data; • District policies regarding record keeping; • Records that are organized, current and accessible; • Examples of instruments used for assessment; • Feedback provided to learners and parents regarding learner growth and achievement. 	The clinical intern provides evidence of: <ul style="list-style-type: none"> • Records with learners' assessment scores; • Analysis of data; • District policies regarding record keeping; • Records that are organized, current and accessible; • Examples of instruments used for assessment. 	The clinical intern provides evidence of: <ul style="list-style-type: none"> • A grade book with learners' grades; • Records that are somewhat organized, and current; • Examples of instruments used for assessment. 	The clinical intern needs help in maintaining and analyzing accurate learner records.	

Standard 9 (Professional Learning and Ethical Practices) Comments:

Standard #10: Leadership and Collaboration

The clinical intern seeks appropriate leadership roles and opportunities to take responsibility for student learning, to collaborate with learners, families, colleagues, other school professionals, and community members to ensure learner growth, and to advance the profession.

10.1 The clinical intern provides evidence of contributing to school and/or district by voluntarily offering assistance, and participating in school district events, projects, and extracurricular activities.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
The clinical intern provides evidence of: <ul style="list-style-type: none"> • Actively participating in professional in-service training, school district meetings, conferences, and workshops; • Providing additional assistance to learners through tutoring before or after school; • Participating in school activities such as plays, 	The clinical intern provides evidence of: <ul style="list-style-type: none"> • Attending professional in-service training, school district meetings, conferences, and workshops; • Participating in school activities such as plays, concerts, trips, 	The clinical intern provides brief evidence of attending school meetings and participating in school events, projects or activities.	The clinical intern does not provide substantial evidence of contributing to the school or district by participating in events, projects, or activities.	

concerts, trips, sports, and celebrations; • Attending school meetings such as PTA, faculty meetings, and/or parent-teacher conferences.	sports, and celebrations; • Attending school meetings such as PTA, faculty meetings, or conferences			
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Standard 10 (Leadership and Collaboration) Comments:

Standard #11: Professional Responsibility

Clinical interns shall act in accordance with legal and ethical responsibilities and shall use integrity and fairness to promote the success of all learners.

11.1 Fosters and maintains a learning environment which protects learners from sexually, physically, verbally, or emotionally harassing behavior by acting in a sound, reflective, sensitive, and professionally responsible manner.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern acts in a professionally responsible manner by:</p> <ul style="list-style-type: none"> • Following the school's professional code of conduct; • Consistently adhering to school and district policies; • Maintaining professional relationships with learners, colleagues, and families; • Acting in compliance with school board policies for learners and teachers; • Always acting in a sound and professionally responsible manner with learners, families, and community; • Showing respect for each learner as an individual and the class as a whole; • Attending appropriate professional development programs to further learn about current concerns within the schools and community; • Taking responsibility for the learning of all learners; • Advocating for learners; • Deepening their own understanding of their own frame of reference and potential biases. 	<p>The clinical intern acts in a professionally responsible manner by:</p> <ul style="list-style-type: none"> • Following the school's professional code of conduct; • Consistently adhering to school and district policies; • Maintaining professional relationships with learners and colleagues; • Acting in compliance with school board policies for learners and teachers; • Showing respect for each learner as an individual and the class as a whole. 	<p>The clinical intern needs to improve in one or more of the following:</p> <ul style="list-style-type: none"> • Following the school's professional code of conduct; • Consistently adhering to school and district policies; • Maintaining professional relationships with learners and colleagues; • Acting in compliance with school board policies for learners and teachers; • Always acting in a sound and professionally responsible manner. 	<p>The clinical intern needs improvement in acting in a professionally responsible manner.</p>	

11.2 The clinical intern exhibits appropriate personal and professional behaviors (e.g. appropriate dress, language and interaction with school personnel, peers and learners).

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern:</p> <ul style="list-style-type: none"> Adheres to school professional code of conduct; Maintains a calm and collected demeanor even when under stress; Dresses professionally; Is reliable, punctual, and meets deadlines; Communicates with colleagues and supervisor, families, and others in a professional manner; Poses and listens to constructive suggestions to enhance the teaching and learning process; Implements feedback and suggestions to improve practice. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> Adheres to school professional code of conduct; Dresses professionally; Is reliable, punctual, and meets deadlines; Communicates with colleagues and supervisor in a professional manner; Implements most suggestions to improve practice. 	<p>The clinical intern usually:</p> <ul style="list-style-type: none"> Adheres to school professional code of conduct; Maintains a calm demeanor most of the times; Dresses professionally; Is reliable, punctual, and meets most deadlines; Implements some of the feedback and suggestions to improve practice. 	<p>The clinical intern needs improvement in one or more of the following:</p> <ul style="list-style-type: none"> Adhering to school professional code of conduct; Maintaining a calm demeanor even when under stress; Dressing professionally; Being reliable, punctual, and meeting deadlines; Communicating with colleagues in a professional manner; Implementing feedback and suggestions to improve practice. 	

11.3 The clinical intern demonstrates effective reading, writing, speaking, mathematics, and technology skills required of a professional.

Advanced Proficient	Proficient	Novice	Emergent	Not Observed
<p>The clinical intern:</p> <ul style="list-style-type: none"> Writes in clear, well-constructed communication that is free of spelling and grammatical errors; Writes in an effective and professional manner; Speaks clearly and articulately in a manner that is professional and intelligent; Uses mathematics effectively to analyze learner achievement and for other tasks; Makes effective use of technology in planning and in their teaching. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> Writes in well-constructed communication that is mostly free of spelling and grammatical errors; Speaks clearly, using standard English; Uses mathematics to analyze learner achievement and for other tasks; Makes use of technology when available, in planning and implementing lessons. 	<p>The clinical intern:</p> <ul style="list-style-type: none"> Writes in communication that usually has some spelling and grammatical errors; Speaks using standard English, but may have some language problems; Needs to use mathematics to analyze learner achievement; Needs to make more effective use of technology. 	<p>The clinical intern needs to improve in one or more of the following: reading, writing, speaking, mathematics, or technology skills.</p>	

Standard 11 (Professional Responsibility) Comments:

Total number of all competencies rated:

Total score on all indicators you rated:

Overall teaching candidate score:

Closing Comments:

Appendix 12: Clinical Placement Alert Form**Office of Clinical Experiences & Applied Research**

Seton Hall University

College of Education & Human Services

Jubilee Room 423- South Orange, NJ 07079

Telephone (973) 767-9347 - Fax (973) 761-7642

Email: cehsfieldoffice@shu.edu

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
☐ SSER ☐ 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. Please indicate all applicable areas of concern:

___ 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: 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

Appendix 13: Guidelines During Clinical Practice

Following are guidelines for clinical interns to follow during clinical practice:

- Familiarize oneself with the school and school district, including but not limited to, teaching and assessment philosophies, structure, materials, administration, and neighborhood.
- Clinical interns are required to demonstrate professional dispositions and demeanor, and dress professionally at all times.
- Sign in and out of the building in the school office each day at the time of arrival and departure. If the school does not require this of teachers, you may use the school's Visitor's Book for this purpose. In the event of a question about attendance, written documentation will prevail over the clinical intern's "word."
- Maintain professional interactions with staff and students at all times. Be pleasant and courteous to everyone in the school building.
- Clarify how each individual wishes to be addressed. Use titles to address all employees and family members (Dr., Ms., Mrs., Mr., Rev., etc.) unless receiving permission to use a first name.
- Report on time every day and remain in the school building for the full day, following the teacher's work schedule not the students' attendance schedule, which includes participation in all meetings, professional development days, and other professional responsibilities the cooperating teacher fulfills during the normal work day.
- Recognize that you are an apprentice assigned to learn from a cooperating teacher who has demonstrated success in the profession. As such, the cooperating teacher has the final determination about the content and methodology used within the classroom.
- Engage in professional dialogue and discourse to learn the rationale behind a cooperating teacher's decisions and actions to help you grow and develop as a reflective professional.
- Be receptive to suggestions and constructive feedback from the cooperating teacher and clinical supervisor.
- Prepare written lesson plans ahead of time and present them to your cooperating teacher in advance, even though your cooperating teacher or administrator may not require such lesson planning. You are a student who is learning and must demonstrate that you are giving thought to all dimensions of teaching, learning, and assessment.
- Have all lesson plans approved by the cooperating teacher for content and methodology before implementing them, and in sufficient time for you to make changes (and be reviewed again) should they be required by the cooperating teacher.
- Maintain confidentiality with respect to information given by parents and families, faculty, administrators, or supervisors. This includes information derived from student performance, pupil data records, personnel records, or faculty meetings.
- If you are ill and cannot attend school, notify your cooperating teacher, school office, OCEAR and clinical supervisor (if scheduled to observe you) of your absence prior to the start of the school day. If you are ill, please make arrangements to get your lesson plans to your cooperating teacher prior to the start of the school day (for example, send as an email attachment to the cooperating teacher, have someone else drop your lesson plans off at the school, etc.).
- Teach the curricula approved by the school and the district where placed. The cooperating teacher(s), in conjunction with the clinical intern will determine the programs or units to be taught by the clinical intern.
- Apply the principles of effective teaching of lessons by practicing and observing effective classroom management.

- Maintain ethical conduct in all relations with the staff, student body, parents and guardians, the administration, and other teacher candidates.
- Do not develop personal relationships including, but not limited to, dating employees, parents and/or relatives of students in the school, and particularly your cooperating teacher. As any professional in the school may influence the evaluation, this could create a potential conflict of interest.
- Do not add any students to your social networks such as Facebook, Instagram or other social networks *for any reason as they are minors*. Similarly, do not accept invitations from students (whether in your classes or not) who request to add you to their accounts.
- Do not drive students to any location, including their home, in your car. Do not engage in any non-school activity with the students in your classroom and school.
- Do not email, text, or telephone a student for any reason as they are minors. Similarly, do not permit students to communicate with you via text messages, email, or telephone.
- Maintain communication with your clinical supervisor and seek guidance, clarity, and support, particularly in situations that cause you concern.
- Maintain continual communication with the cooperating teacher by setting regular weekly meetings to discuss concerns, plans, and lessons in progress.
- Adhere to all policies and procedures outlined in the Clinical Placement Handbook.
- Understand and follow the cooperating school's policies as applied to regularly employed staff:
 - Arrival and departure times
 - Reporting absences
 - Dress code
 - Parking
 - Use of teacher's lounge and/or workroom
 - School-wide discipline plan
 - Computer usage
 - Lesson plan deadlines
 - Rapport and interactions with students
 - In-service sessions
 - Faculty meetings
 - Parent/teacher conferences
- Become familiar with the cooperating school's policies and procedures regarding the following:
 - School media center
 - Health services
 - Guidance services
 - Co-curricular activities
 - Technology resources
 - Use of duplicating materials
 - Grading procedures
 - Emergency procedures
 - Fire, lockdown or tornado drill regulations
 - Student referral procedures
 - Rules of conduct in assemblies, on playgrounds, etc.

(Adapted from the Clinical and Student Teaching Handbook for Northeastern University.)

Appendix 14: Questions Clinical Interns Should Ask**Personal Concerns**

- During our convocation on campus, we set goals for our clinical practice experience. Can we take some time to review my goals and identify best ways to meet them this semester?
- I'd like to share my contact information and that of my clinical supervisor with you. Can you please provide me with the best contact information for you? What contact information would you like me to share with my clinical supervisor?
- Review the clinical placement handbook with your cooperating teacher and be sure she/he understand their role with regard to timesheets, evaluations and conferences with the teacher candidate and clinical supervisor. Do you have any questions or concerns regarding your responsibilities as a cooperating teacher?
- What is the dress code for teachers at the school? (The school dress code is to be integrated with the SHU dress code policy.)
- May we establish a scheduled, routine time when we can discuss my performance?

General School Information

- What are the resources that can be used by the teachers and class, such as, audio-visual aids, maps, library, computers, photocopying?
- What other support teachers (nurses, counselors, therapists) are available? It is possible for me to have time to talk with and learn from them at some point during the semester?
- Are curriculum guides for teachers available in the school? If so, where are they kept? What other teaching resources are used in the classroom?
- What curriculum committees exist in the district? When do they meet?

Procedures and Policies

- What time do classes begin and end? What are the school's hours?
- When are teachers expected to be here in the morning? How long after school has ended are teachers asked to remain in the building?
- May I have more information on general school policies?
- What is the school's procedure for a teacher absence? (This procedure is an addition to the set procedure communicated by OCEAR.)
- Where can I access the district calendar?
- May I have a calendar of school activities?
- What extracurricular activities and meetings will I be able to attend?
- What extra duties/responsibilities will be available for me?
- Where is the school's policy manual and may I have access to it?
- Where is the school's emergency plan? (i.e., Lockdown, Safe School Plan, School Emergency Operations Plan, School Safety and Security Plan, Crisis Management Plan, etc.)

Classroom

- What does the cooperating teacher expect of me and what content/skills will I teach on what timeline? (Review the traditional week-by-week and co-teaching models with your cooperating teacher to develop a plan that works for both of you.)
- Are classes grouped/tracked by academic ability?
- What classroom management plan does the cooperating teacher have in place?
- What are the strengths and needs of the students in the classroom?
- What is the grading system used in the school?
- How are discipline problems handled?
- What are the major interests and activities of the students in the classroom?
- What special talents and resources can my cooperating teacher share with me?
- What opportunities are available to observe an IEP process?

(Modified from the College of St. Elizabeth's Clinical Placement Handbook.)

Appendix 15: Guide for Week-to-Week Activities in Clinical Practice 2

The following is intended to provide guidance to the structure and time over the course of the student teacher's semester. It, along with the checklists for Cooperating Teachers and Supervisors, provide an overview for the semester. Please contact the Office of Clinical Experiences & Applied Research at 973-761-9347 with any questions. Supporting documentation and information can also be found on the Office web site at

<http://blogs.shu.edu/cear>.

1st Week

- Teacher candidate gets to know students, familiarizes him/herself with classroom rules and routines, and assists the cooperating teacher with supporting student needs.

2nd Week

- The cooperating teacher, teacher candidate, and clinical supervisor meet to establish goals for the semester. The goals address short-term objectives as well as long-range development. This plan will guide the triad for the remainder of the semester. If unexpected issues arise, the plan can and should expand to actively address those issues.
- The teacher candidate takes over one subject or class to plan and teach. The first observation takes place, using the Observation & Conference Report (O&C). This same evaluation tool is used by the clinical supervisor for observations 1-3 and 5-7. The cooperating teacher does not complete this evaluation.

3rd – 7th Weeks

- The teacher candidate continues to take on teaching and planning for additional subjects or classes. He/she attends meetings, in-service workshops, and assists in activities associated with the daily work of teachers. Generally, the student teacher assumes the role of lead teacher for an additional period each week.
- The objectives and goals outlined in the plan are addressed through daily teaching, routines and observations. The cooperating teacher and university supervisor provide regular, constructive feedback before and after observations.
- If serious issues arise, a Clinical Placement Alert Form is filed by the cooperating teacher and/or clinical supervisor with the Office of Clinical Experiences. A link to this form is available under the Forms tab on this website's main page.

8th - 14th Weeks

- The teacher candidate, by the start of the eighth week, should be planning and teaching all subjects or at least four classes. If there are additional adults in the room, the teacher candidate plans for activities of the support staff as well as for the students. The mid-term evaluation, completed using the Clinical Competency Inventory, or CCI is completed by the cooperating teacher and university supervisor at the fourth observation.
- The teacher candidate attends meetings, in-service workshops, key school events and assists in activities associated with the daily work of teachers.
- The objectives and goals outlined in the plan are addressed through daily teaching, routines, and observations. The cooperating teacher and university supervisor provide regular, constructive feedback before and after scheduled observations. By the end of this period, the final evaluation (CCI) is completed by both the cooperating teacher and the university supervisor at the eighth observation.

15th week

- The teacher candidate steps back into a supporting role so that the students can adjust to the transition back to the cooperating teacher. The teacher candidate continues to actively help the teacher and students in this supporting role.
- Evaluations and observation reports are submitted to the Office of Clinical Experiences and Applied Research through our online database. Time sheets are scanned or sent as a screen shot via email to cehsfieldoffice@shu.edu by the conclusion of the clinical practice.

Appendix 16: Co-Teaching Models for Clinical Practice

The following two pages provide some information and ideas on models for co-teaching. Clinical interns and cooperating teacher are *not* required nor restricted to implementing the following co-teaching models in the classroom.

Models of Co-Teaching:

Small Group	Whole Group
Station Teaching	One Teach, One Observe
Parallel Teaching	Synchronous Team Teaching/Teaming
Alternative Teaching	One Teach, One Assist

Co-Teaching Approaches: (as posted on Dr. Marilyn Friend's website at <http://marilynfriend.com/approaches.htm>)

One Teach, One Observe. One of the advantages in co-teaching is that more detailed observation of students engaged in the learning process can occur. With this approach, for example, co-teachers can decide in advance what types of specific observational information to gather during instruction and can agree on a system for gathering the data. Afterward, the teachers should analyze the information together. The teachers should take turns teaching and gathering data, rather than assuming that the special educator is the only person who should observe.

Station Teaching. In this co-teaching approach, teachers divide content and students. Each teacher then teaches the content to one group and subsequently repeats the instruction for the other group. If appropriate, a third "station" could give students an opportunity to work independently. As co-teachers become comfortable with their partnership, they may add groups or otherwise create variations of this model.

Parallel Teaching. On occasion, students' learning would be greatly facilitated if they just had more supervision by the teacher or more opportunity to respond. In parallel teaching, the teachers are both teaching the same information, but they do so to a divided class group. Parallel also may be used to vary learning experiences, for example, by providing manipulatives to one group but not the other or by having the groups read about the same topic but at different levels of difficulty.

Alternative Teaching: In most class groups, occasions arise in which several students need specialized attention. In alternative teaching, one teacher takes responsibility for the large group while the other works with a smaller group. These smaller groups could be used for remediation, pre-teaching, to help students who have been absent catch up on key instruction, assessment, and so on.

Teaming: In teaming, both teachers share delivery of the same instruction to a whole student group. Some teachers refer to this as having "one brain in two bodies." Others call it "tag team teaching." Most co-teachers consider this approach the most complex but satisfying way to co-teach, but it is the approach that is most dependent on teachers' styles.

One Teach, One Assist. In a final approach to co-teaching, one person would keep primary responsibility for teaching while the other professional circulated through the room providing unobtrusive assistance to students as needed. This should be the least often employed co-teaching approach.

Appendix 17: Suggested Co-Teaching Timeline

In the beginning: One Teach, One Observe is natural – the clinical intern observes the cooperating teacher. As the clinical intern begins delivering individual lessons, the cooperating teacher observes the intern and offers constructive criticism, guidance, and assistance for improvement. This model should be utilized on an ongoing basis. In addition, the One Teach, One Assist model is a good way for the intern to start becoming more familiar with the students and for the students to start becoming more accepting of the intern.

As the clinical intern is increasing responsibility: Station Teaching, Parallel Teaching, and Alternative Teaching are good methods to have the intern become more involved with the planning of more lessons, increase interactions with students, and have the students see the intern and the cooperating teacher as a team.

When the clinical intern has full responsibility of all instruction – Part 1: When the intern assumes full responsibility, for about a three week period of time, it is important that the intern does all of the planning and instruction to experience the amount of work involved in having the full responsibility. The part of One Teach, One Observe where the cooperating teacher observes the student teacher and offers constructive criticism, guidance and assistance for improvement should continue.

When the clinical intern has full responsibility of all instruction – Part 2: After the intern has experienced “doing it all” for three weeks or so, the intern and cooperating teacher should attempt Synchronous Team Teaching/Teaming – where they appear to be “equal team members” and the quality of the instruction should utilize the strengths of the teachers in a cooperative, complementary way. Use of the Station Teaching, Parallel Teaching, and Alternative Teaching models would also be appropriate.

When the clinical intern is returning the responsibility back to the cooperating teacher: Any or all models would be appropriate.

(Model for Suggested Co-Teaching Timeline adapted from a presentation of co-teaching at the 2010 annual PDS National Conference, by Bernard Badiali (Penn State), and Jodi Kamin and Nicole Titus (State College Area School District) and materials provided by the College of St. Elizabeth's.)

Appendix 18: Role of the Cooperating Teacher

The success of a teacher candidate's clinical placement depends on a development of an interactive, professional relationship between the teacher candidate and their cooperating teacher. The cooperating teacher is in a position to show the teacher candidate the satisfaction that successful teaching can bring and the responsibilities he or she must assume.

In a **pre-clinical internship**, the cooperating teacher is asked to fulfill the following:

1. Discuss with the pre-clinical intern their goals, expectations and requirements for the placement.
2. Share appropriate contact information with the pre-clinical intern and ask for his/her contact information along with that of the clinical supervisor.
3. Orient the pre-clinical intern to the school, including, but not limited to: personnel, facilities, available equipment and supplies, scheduling, school procedures, special events and assemblies, duty assignments, etc. The intern should be made to feel a part of the community in which he or she will teach. Inclusion in all grade-level, district, and special education meetings, as well as parent conferencing is vital.
4. Provide models for successful classroom management.
5. Guide the clinical intern in lesson planning, implementation, and assessment.
6. Assist the pre-clinical intern in learning about the special needs of their students and the services provided by the school for these students.
7. Model highly effective teaching while allowing the pre-clinical intern to assume the responsibilities for which he or she is prepared and required to complete for course requirements. Direct the pre-clinical intern to curriculum guides, materials, and supplemental aids related to the subject matters taught and observed.
8. Acquaint the pre-clinical intern with the mechanics of classroom routines – including how and why the routines were established.
9. Monitor the pre-clinical intern's progress in developing necessary teacher competencies and provide constructive criticism, guidance, and support. (Please be mindful that the pre-clinical intern is a novice and may be in a classroom for the very first time as a pre-professional.)
10. Approve the pre-clinical intern's mid-term and final timesheets.
11. Complete the Observation & Conference Report (O&C) evaluation near the end of the pre-clinical intern's time in the classroom.

During **clinical practice**, the cooperating teacher is asked to fulfill the following:

Responsibilities of the Cooperating Teacher during the First Week or Two

1. Discuss with the clinical intern their goals, expectations and requirements for clinical practice. Be sure to cover the clinical intern's personal goals and expectations as well as any associated with the senior seminar and edTPA.
2. Share appropriate contact information with the clinical intern and ask for his/her contact information along with that of the clinical supervisor.
3. Develop a list of overall expectations of the clinical intern for the semester. Determine a plan and schedule for transitioning the classroom from the cooperating teacher to the clinical intern. (Use **Appendix 15**, the Guide for week-to-week activities and **Appendix 16**, Co-teaching Models for Clinical Practice as a starting point for the conversation.)
4. With the clinical intern, establish a schedule to discuss lessons, classroom management, progress, or assessment.
5. Discuss the community the school serves and parental involvement in school affairs with the clinical intern.
6. Help the clinical intern become acquainted with the individual students, especially those with special needs.
7. Orient the clinical intern to the classroom schedule, daily routines, and procedures.

8. Discuss expected clinical intern arrival/departure and phoning in notice of personal illness.
9. Discuss the curriculum content and materials with the clinical intern.
10. Provide the clinical intern with a desk/work area and a secure place for personal effects.
11. Provide the clinical intern with an assembled packet of school and classroom procedures and policies, including emergency procedures, harassment policies, and curriculum or Internet restrictions.
12. Explain the organizational structure of the school and/or department, available resources, and overall educational philosophy of the school.
13. Orient the clinical intern with the school facilities, equipment, materials, and any additional school responsibilities he or she may assume (e.g., lunchroom and playground duty, hall monitor during passing periods, etc.).
14. Explain the school and classroom's evaluation system and the teacher candidate's grading and record-keeping responsibilities.
15. Introduce the clinical intern to students, building staff, administration, and parents.
16. Discuss the personal philosophies of teaching and personal/professional backgrounds of the cooperating teacher and clinical intern.

Responsibilities of the Cooperating Teacher throughout Clinical Practice

1. Demonstrate effective teaching methods and discuss these methods with the clinical intern.
2. Accept the clinical intern as a co-worker and convey that acceptance to students and colleagues.
3. Help the clinical intern in the development of technical/management competencies and reflective teaching.
4. Help the clinical intern in the development of positive, effective classroom management skills.
5. Provide a supportive environment by assisting your clinical intern to meet and achieve success through a variety of positive teaching experiences.
6. Meet on a regular basis (both daily and weekly) to discuss the clinical intern's progress, concerns, lesson plans, etc.
7. Provide written and/or oral feedback on clinical intern's lesson preparation, materials, and performance on a regular basis using the evaluation tools
8. Guide and support the clinical intern in developing his/her own personal teaching style.
9. Attend pre-observation and post-observation conferences, if possible, with the clinical intern and clinical supervisor.
10. Work with the clinical supervisor and the Office of Clinical Experiences & Applied Research (OCEAR) to assist and support the student teacher.
11. Provide the clinical intern with experiences in as many of the following areas as possible:
 - Student conferences
 - Parent conferences
 - Co-curricular activities
 - School reports and records
 - Departmental and faculty meetings
 - Workshops and in-services
12. Provide opportunities for the clinical intern to develop as a professional and teacher.
13. Approve the clinical intern's timesheet.
14. Complete the Observation & Conference Report (O&C) evaluation three times during the clinical intern's clinical practice 1 semester.
15. Complete the Clinical Competency Inventory (CCI) evaluation at the midterm (4th observation) and final (7th observation) of the clinical practice 2 semester.
16. Complete the evaluation of the clinical supervisor assigned to your clinical intern.

(Adapted from the Clinical Placement Handbooks from College of St. Elizabeth's and Northeastern University.)

Appendix 19: Cooperating Teacher Checklist

This is a one page 'quick guide' to help with communication and planning with the SHU teacher candidate, university supervisor and cooperating teacher. It is NOT intended as a comprehensive, detailed guide. Please be sure to contact the Office of Clinical Experiences & Applied Research at (973)761-9347 or cehsfieldoffice@shu.edu with any questions or concerns. Thank you for your dedication, commitment and time in helping to develop the next generation of teachers.

Beginning of Semester

- ☐ I have the email address and phone number for the teacher candidate in my classroom.
- ☐ I have the email address and phone number for the clinical supervisor observing my teacher candidate.
- ☐ The teacher candidate and I met to discuss classroom management, planning and set goals for the semester and shared those goals with the clinical supervisor.
- ☐ The teacher candidate, clinical supervisor and I have discussed a plan for reflecting on, providing feedback and growth opportunities for the teacher candidate following each observation by the clinical supervisor.
- ☐ I watched the video and completed the online quiz for the Clinical Competency Inventory (CCI) evaluation tool at <http://blogs.shu.edu/cear> (CTs of clinical interns only)
- ☐ I watched the video and completed the online quiz for the Observation & Conference Report (O&C) evaluation tool at <http://blogs.shu.edu/cear> (CTs of both pre-clinical interns and clinical interns).
- ☐ I've gone to the website (<http://blogs.shu.edu/cear>) and looked for important information such as expectations of a CT, setting goals, guide to activities, evaluations, etc.
- ☐ I looked over the Clinical Placement Alert information on the website (<http://blogs.shu.edu/cear>) and know what to do and who to contact if I have any concerns regarding my teacher candidate.
- ☐ The teacher candidate and I discussed the timesheets and signatures required throughout the semester. (Different process for pre-clinical interns vs. clinical interns. Details are on the website.)

Middle of Semester

- ☐ The teacher candidate, clinical supervisor and I have scheduled a date and time for the observation and evaluation of the teacher candidate. (pre-clinical interns only)
- ☐ I received a link to the CCI (clinical interns only) and/or the O&C (pre-clinical and clinical interns) evaluation instrument prior to the midterm observation or one time observation of my teacher candidate.
- ☐ I completed the CCI and/or O&C online evaluation instrument PRIOR to the due date (See the calendar on the website at <http://blogs.shu.edu/cear> for all dates) AND ensured the teacher candidate received a copy.
- ☐ The teacher candidate, clinical supervisor and I met to allow for reflection, feedback and evaluation of the midterm observation (clinical interns) or one observation (pre-clinical interns).
- ☐ I signed off and approved the midterm timesheet required for my clinical intern. (Clinical Experience and Clinical Practice 1 only)

End of Semester

- ☐ I received a link to the CCI (clinical interns only) evaluation instrument prior to the final observation of my teacher candidate.
- ☐ I completed the CCI online evaluation instrument PRIOR to the due date (See the calendar on the website at <http://blogs.shu.edu/cear> for all dates) AND ensured the teacher candidate received a copy.
- ☐ The teacher candidate, clinical supervisor and I met to allow for reflection, feedback and evaluation of the final observation (clinical interns) or one observation (pre-clinical interns).
- ☐ I signed off and approved the final timesheet required for my pre-clinical intern or the semester's timesheet for my clinical intern.
- ☐ I completed all the necessary paperwork and/or requirements for my professional development hours and/or honorarium. Forms are available on <http://blogs.shu.edu/cear>.
- ☐ I provided any feedback from this semester to the office at cehsfieldoffice@shu.edu.
- ☐ If I hosted a year long intern, I completed the evaluation of the clinical supervisor who worked with my clinical intern.

Appendix 20: Cooperating Teacher Evaluation of Clinical Supervisor in Clinical Practice

Following is an example of the evaluation instrument of clinical supervisors, which cooperating teachers of a clinical intern are required to complete. Cooperating teachers of clinical interns in the full-year of clinical practice, have between 8 and 10 interactions with the clinical supervisor upon which to base the evaluation.

Supervisor Name:

Your school:

Clinical Intern:

First Name

Last Name

Please use the following ratings and check the appropriate column:

0- Strongly Disagree 1- Disagree 2- Agree 3-Strongly Agree

	0	1	2	3
1. The supervisor made me aware of the university's expectations for my role as a cooperating teacher.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The supervisor was respectful to the students in the classroom.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The supervisor sought my input regarding the performance of the teacher candidate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The supervisor met with the teacher candidate, regularly, before and/or each observation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. The supervisor provided constructive feedback to the teacher candidate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. The supervisor represented the university preparation program in a professional manner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. The supervisor was considerate of the teacher candidate's time and the classroom schedule.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Appendix 21: Role of the Clinical Supervisor

In a **pre-clinical internship**, the clinical supervisor is asked to fulfill the following:

1. Arrange convenient times for announced observations at the school.
2. Inform the school office of your arrival and departure from the building.
3. Observe the pre-clinical intern for the required number of visits during the semester. Each visit is to include a pre-observation dialogue, the observation and a post-observation conference.
4. The clinical supervisor will complete the O&C evaluation within 72 hours of the pre-clinical intern observation and ensure the teacher candidate and cooperating teacher have a copy of the evaluation.

During **clinical practice**, the clinical supervisor is asked to fulfill the following:

1. Arrange convenient times for announced observations at the school.
2. Inform the school office of your arrival and departure from the building.
3. Observe the clinical intern for the required number of visits during the semester. During clinical practice 1, there are three observations and during clinical practice 2 there are seven observations. Each visit is to include a pre-observation dialogue, the observation and a post-observation conference.
4. The clinical supervisor will complete the O&C or CCI evaluation within 72 hours of the pre-clinical intern observation and ensure the teacher candidate and cooperating teacher have a copy of the evaluation.
5. Develop a professional rapport with the clinical intern and learn about his/her goals, strengths and interests.
6. Help the teacher candidate in the development of technical/management competencies and reflective teaching.
7. Offer support to the clinical intern in practical and theoretical work by considering short- and long-term professional needs.
8. Be supportive of the cooperating teacher's efforts, and be readily available to teacher candidates and cooperating teachers for discussion of the clinical experience.
9. Immediately inform the Director of OCEAR when any problems arise during the clinical intern practice. Complete a Clinical Placement Alert Form with input from the cooperating teacher, if determined to be necessary.
10. Conduct triad mid-term and final conferences with the teacher candidate and cooperating teacher(s).
11. Provide fair letters of recommendation for the teacher candidate upon request.
12. Be a positive, guiding force by contributing teaching insights and educational expertise in helping the clinical intern to develop professionally.
13. Assist the cooperating teacher and teacher candidate with questions regarding the evaluation process.
14. Offer the clinical intern guidance and help him/her problem solve as needed.
15. Complete all required clinical experience evaluation forms by their respective deadlines.
16. Attend all required clinical supervisor meetings, in-services and convocation events.
17. Submit travel expense reports as required by OCEAR.

Appendix 22: Clinical Supervisor Checklist

This is a one page 'quick guide' to help with communication and planning with the SHU teacher candidate, clinical supervisor and cooperating teacher. It is NOT intended as a comprehensive, detailed guide. Please be sure to contact the Office of Clinical Experiences & Applied Research at (973)761-9347 or cehsfieldoffice@shu.edu with any questions or concerns. Thank you for your dedication, commitment and time in helping to develop the next generation of teachers.

Beginning of Semester

- ☐ I have the email address and phone number for the teacher candidate(s) assigned to me.

- ☐ I have the email address and phone number for the cooperating teacher mentoring my teacher candidate(s).

- ☐ I followed up with the teacher candidate and cooperating teacher to confirm the goals and objectives for the semester I need to be aware of and help support throughout the semester.

- ☐ The teacher candidate, cooperating teacher and I have discussed a plan for reflecting on, providing feedback and growth opportunities for the teacher candidate following EACH observation by the clinical supervisor. (clinical interns only)

- ☐ I watched the video and completed the online quiz for the Clinical Competency Inventory (CCI) evaluation tool at <http://blogs.shu.edu/cear> (Supervisors of clinical interns only)

- ☐ I watched the video and completed the online quiz for the Observation & Conference Report (O&C) evaluation tool at <http://blogs.shu.edu/cear> (Supervisors of pre-clinical interns, clinical interns or both).

- ☐ I have talked with the cooperating teacher and teacher candidate about the classroom schedule and have scheduled or plan to schedule my observation(s) during convenient and appropriate times for the classroom.

- ☐ I looked over the Clinical Placement Alert information on the website (<http://blogs.shu.edu/cear>) and know what to do and who to contact if I have any concerns regarding my teacher candidate.

- ☐ I've received a link to the O&C online evaluation instrument for my teacher candidate(s). (For both pre-clinical interns and clinical interns.) I've scheduled and completed observations 1-3 for my clinical intern(s).

Middle of Semester

- ☐ The teacher candidate, cooperating teacher and I have scheduled a date and time for the observation and evaluation of the teacher candidate later in the semester. (pre-clinical interns only)

- ☐ I received a link to the CCI instrument prior to the midterm observation and evaluation. (clinical interns only)

- ☐ I completed the CCI online evaluation instrument PRIOR to the due date (See the calendar on the website at <http://blogs.shu.edu/cear> for all dates) AND ensured the teacher candidate and the cooperating teacher received a copy.

- ☐ The teacher candidate, cooperating teacher and I met to allow for reflection, feedback and evaluation of the midterm observation (clinical interns) or one observation (pre-clinical interns).

- ☐ I've been in communication with my teacher candidate and assigned cooperating teacher regarding any areas of excellence and areas for improvement and I've scheduled my observation/evaluation.

End of Semester

- ☐ I received a link to the CCI (clinical interns only) evaluation instrument prior to the FINAL observation of my teacher candidate.

- ☐ I completed the CCI online evaluation instrument PRIOR to the due date (See the calendar on the website at <http://blogs.shu.edu/cear> for all dates) AND ensured the teacher candidate and the cooperating teacher received a copy.

- ☐ I received a link to the O&C evaluation instrument prior to the observation of my intern AND I completed the online evaluation instrument PRIOR to the due date (See the calendar on the website at <http://blogs.shu.edu/cear> for all dates) AND ensured the teacher candidate and the cooperating teacher received a copy.

- ☐ The teacher candidate, cooperating teacher and I met to allow for reflection, feedback and evaluation of the final observation (clinical interns) or one observation (pre-clinical interns).

- ☐ I completed all the necessary paperwork and/or requirements for my stipend or I've been in communication with the Office of Clinical Experiences regarding any missing paperwork.

- ☐ I provided any feedback from this semester to the office at cehsfieldoffice@shu.edu or directly to the Director.

Appendix 23: Clinical Supervisor Evaluation of Cooperating Teacher in Clinical Practice

Following is an example of the evaluation instrument of cooperating teachers, which clinical supervisors of a clinical intern are required to complete. Clinical supervisors of clinical interns in the full-year of clinical practice, have between 8 and 10 interactions with the cooperating teacher upon which to base the evaluation.

Cooperating Teacher:

First Name

Last Name

School:

Clinical Intern:

First Name

Last Name

Please use the following ratings and check the appropriate column:

0- Strongly Disagree 1-Disagree 2- Agree 3-Strongly Agree

	0	1	2	3
1. The cooperating teacher made me aware of his/her philosophy regarding mentoring a teacher candidate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The cooperating teacher was respectful and considerate of the teacher candidate in the classroom.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The cooperating teacher sought my input regarding the performance of the teacher candidate.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The cooperating teacher represented the profession of teaching in a professional manner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Appendix 24: Clinical Practice I & II Placement Expectation Chart – ESEDSenior Clinical Internship Expectations - **Elementary/Special Education**

Courses, edTPA, Clinical Expectations & Evaluations for Clinical Practice 1 & Clinical Practice 2 Semesters

Clinical Practice 1 (EDST 2800)	Clinical Practice 2 (EDST 4001)
<p><u>Clinical Requirements aligned with Courses:</u></p> <ul style="list-style-type: none"> • CPSY 3400 - Math assessment and teach re-engagement lesson • CPSY 3400 - Language Arts assessment and teach re-engagement lesson • EDST 2006 – teach two science lessons <p><u>Clinical Requirement aligned with edTPA:</u></p> <ul style="list-style-type: none"> • Task 4 (Math Re-engagement): includes (i) context for learning; (ii) learning segment description; (iii) math re-engagement lesson, and (iv) completed commentary <p><u>Clinical Placement Expectations:</u></p> <ul style="list-style-type: none"> • Complete course aligned and edTPA requirements (see above) • Understanding of rationale for setting up the classroom (physical space, routines, rules) • Participate in development, communication and implementation of classroom management strategies and routines • Discuss, understand and participate (when appropriate) in parent-teacher communication (open house and conferences) • Exposure to student information system, IEP's, 504 plans, and BIP's within the confidential guidelines of the district • Discuss and explore differing strategies to respond to struggling learners • Participate in formal and informal professional development and staff meetings • Collaborate with co-teachers, aides, grade level teachers, and other school personnel (e.g. speech therapist, nurse) • Observe/Talk with teacher about (i) giving meaningful feedback to students and (ii) using knowledge of students to inform planning and instruction (prior knowledge, interests, community, family, culture) <p><u>Clinical Evaluations:</u></p> <ul style="list-style-type: none"> • 3 clinical observations with the Observation and Conference Report by the clinical supervisor; 2 by the cooperating teacher 	<p><u>Clinical Requirements aligned with Courses:</u></p> <ul style="list-style-type: none"> • EDST 4001 – edTPA & professional portfolio <p><u>Clinical Requirements aligned with edTPA:</u></p> <ul style="list-style-type: none"> • Task 1 (Planning): includes (i) context for learning; (ii) development of learning segment (3-5 lessons) focused on comprehension or composition; (iii) development of lesson plans, instructional materials, and assessments, and (iv) complete commentary. • Task 2 (Instruction): includes (i) teach/video the learning segment on comprehension or composition and (ii) complete commentary • Task 3 (Assessment): includes (i) analysis of whole class learning, (ii) analysis of focus student learning, (iii) analysis of teaching, and (iv) complete commentary. <p><u>Clinical Placement Expectations:</u></p> <ul style="list-style-type: none"> • Complete course aligned and edTPA clinical requirements (see above) • Elaborate on and continue expectations from the Clinical Practice 1 semester • Structured increase of planning and teaching responsibility in all content areas for clinical intern certification (language arts, math, social studies, science) • Focus on effectively planning and teaching students with IEP's, 504 plans, and English language learners. <p><u>Clinical Evaluations:</u></p> <ul style="list-style-type: none"> • 7 clinical observations (5 O&C and Midterm & Final CCI) by clinical supervisor; at least 1 observation in Math, ELA, Science and SS by clinical supervisor • 2 formal evaluations (Midterm & Final CCI) by cooperating/mentor teacher

Appendix 24: Clinical Practice I & II Placement Expectation Chart – SCED & SSSED

Senior Clinical Internship Expectations – **Secondary and Secondary Special Education**
 Courses, edTPA, Clinical Expectations & Evaluations for Clinical Practice 1 & Clinical Practice 2 Semesters

Clinical Practice 1 (EDST 2800)	Clinical Practice 2 (EDST 4500)
<p><u>Clinical Requirements aligned with Courses:</u></p> <ul style="list-style-type: none"> EDST 2501 Introduction to Philosophy of Ed. And Curriculum: <ul style="list-style-type: none"> Differentiated Lesson Plans (taught in placement) Classroom Management Plan Classroom Environment Study Structured Observations <p><u>Clinical Requirement aligned with edTPA:</u></p> <ul style="list-style-type: none"> Begin conversation with cooperating teacher in late November/early December about the potential subject specific learning segment for early spring semester. Research classroom environment that connects to context for learning <p><u>Clinical Placement Expectations:</u></p> <ul style="list-style-type: none"> Complete course aligned and edTPA requirements (see above) Understanding of rationale for setting up the classroom (physical space, routines, rules) Participate in development, communication and implementation of classroom management strategies and routines Discuss, understand and participate (when appropriate) in parent-teacher communication (open house and conferences) Exposure to student information system, IEP's, 504 plans, and BIP's within the confidential guidelines of the district Discuss and explore differing strategies to respond to struggling learners Participate in formal and informal professional development and staff meetings Collaborate with co-teachers, aides, grade level teachers, and other school personnel (e.g. speech therapist, nurse) Observe/Talk with teacher about (i) giving meaningful feedback to students and (ii) using knowledge of students to inform planning and instruction (prior knowledge, interests, community, family, culture) <p><u>Clinical Evaluations:</u></p> <ul style="list-style-type: none"> 3 clinical observations with the Observation and Conference Report by the clinical supervisor; 2 by the cooperating teacher 	<p><u>Clinical Requirements aligned with Courses:</u></p> <ul style="list-style-type: none"> EDST 4500 – edTPA & professional portfolio <p><u>Clinical Requirements aligned with edTPA:</u></p> <ul style="list-style-type: none"> Task 1 (Planning): includes (i) context for learning; (ii) development of learning segment (3-5 lessons) focused on comprehension or composition; (iii) development of lesson plans, instructional materials, and assessments, and (iv) complete commentary. Task 2 (Instruction): includes (i) teach/video the learning segment on comprehension or composition and (ii) complete commentary Task 3 (Assessment): includes (i) analysis of whole class learning, (ii) analysis of focus student learning, (iii) analysis of teaching, and (iv) complete commentary. <p><u>Clinical Placement Expectations:</u></p> <ul style="list-style-type: none"> Complete course aligned and edTPA clinical requirements (see above) Elaborate on and continue expectations from the Clinical Practice 1 semester Structured increase of planning and teaching responsibility in all content areas for clinical intern certification (language arts, math, social studies, science) Focus on effectively planning and teaching students with IEP's, 504 plans, and English language learners. <p><u>Clinical Evaluations:</u></p> <ul style="list-style-type: none"> 7 clinical observations (5 O&C and Midterm & Final CCI) by clinical supervisor; all in the focus content area 2 formal evaluations (Midterm & Final CCI) by cooperating/mentor teacher

Appendix 24: Clinical Practice I & II Placement Expectation Chart – CEAS ElementaryClinical Internship Expectations – **CEAS: Elementary (Post Baccalaureate Teacher Certification Program)**

Courses, edTPA, Clinical Expectations & Evaluations for Clinical Practice 1 & Clinical Practice 2 Semesters

Clinical Practice 1 (EDST 6334)	Clinical Practice 2 (EDST 6426)
<p><u>Clinical Requirements aligned with Courses:</u></p> <ul style="list-style-type: none"> • EDST 6413 Elementary Literacy/Assessment • EDST 6415 Elementary Math/Assessment • EDST 6417 Elementary Science, Soc Studies/Assessment <p><i>Teach and assess at minimum one lesson per content area.</i></p> <p><u>Clinical Requirement aligned with edTPA:</u></p> <ul style="list-style-type: none"> • Task 4 (Math Re-engagement): includes (i) context for learning; (ii) learning segment description; (iii) math re-engagement lesson, and (iv) completed commentary <p><u>Clinical Placement Expectations:</u></p> <ul style="list-style-type: none"> • Complete course aligned and edTPA requirements (see above) • Understanding of rationale for setting up the classroom (physical space, routines, rules) • Participate in development, communication and implementation of classroom management strategies and routines • Discuss, understand and participate (when appropriate) in parent-teacher communication (open house and conferences) • Exposure to student information system, IEP's, 504 plans, and BIP's within the confidential guidelines of the district • Discuss and explore differing strategies to respond to struggling learners • Participate in formal and informal professional development and staff meetings • Collaborate with co-teachers, aides, grade level teachers, and other school personnel (e.g. speech therapist, nurse) • Observe/Talk with teacher about (i) giving meaningful feedback to students and (ii) using knowledge of students to inform planning and instruction (prior knowledge, interests, community, family, culture) <p><u>Clinical Evaluations:</u></p> <ul style="list-style-type: none"> • 3 clinical observations with the Observation and Conference Report by the clinical supervisor; 2 by the cooperating teacher 	<p><u>Clinical Requirements aligned with Courses:</u></p> <ul style="list-style-type: none"> • EDST 6426 – edTPA & professional portfolio <p><u>Clinical Requirements aligned with edTPA:</u></p> <ul style="list-style-type: none"> • Task 1 (Planning): includes (i) context for learning; (ii) development of learning segment (3-5 lessons) focused on comprehension or composition; (iii) development of lesson plans, instructional materials, and assessments, and (iv) complete commentary. • Task 2 (Instruction): includes (i) teach/video the learning segment on comprehension or composition and (ii) complete commentary • Task 3 (Assessment): includes (i) analysis of whole class learning, (ii) analysis of focus student learning, (iii) analysis of teaching, and (iv) complete commentary. <p><u>Clinical Placement Expectations:</u></p> <ul style="list-style-type: none"> • Complete course aligned and edTPA clinical requirements (see above) • Elaborate on and continue expectations from the Clinical Practice 1 semester • Structured increase of planning and teaching responsibility in all content areas for clinical intern certification (language arts, math, social studies, science) • Focus on effectively planning and teaching students with IEP's, 504 plans, and English language learners. <p><u>Clinical Evaluations:</u></p> <ul style="list-style-type: none"> • 7 clinical observations (5 O&C and Midterm & Final CCI) by clinical supervisor; at least 1 observation in Math, ELA, Science and SS by clinical supervisor • 2 formal evaluations (Midterm & Final CCI) by cooperating/mentor teacher

Appendix 24: Clinical Practice I & II Placement Expectation Chart – CEAS SecondaryClinical Internship Expectations – **CEAS Secondary (Post Baccalaureate Teacher Certification Program)**

Courses, edTPA, Clinical Expectations & Evaluations for Clinical Practice 1 & Clinical Practice 2 Semesters

Clinical Practice 1 (EDST 6334)	Clinical Practice 2 (EDST 6426)
<p><u>Clinical Requirements aligned with Courses:</u></p> <ul style="list-style-type: none"> EDST 6551 Advanced Teaching Strategies EDST 6426 Assessment of Student Learning Subject Specific Methods courses: Math (6558), Science (6557), Language Arts (6555), Social Studies (6410) <i>Teach at minimum two lessons associated with the focus content area.</i> <p><u>Clinical Requirement aligned with edTPA:</u></p> <ul style="list-style-type: none"> Begin conversation with cooperating teacher in late November/early December about the potential subject specific learning segment for early spring semester. <p><u>Clinical Placement Expectations:</u></p> <ul style="list-style-type: none"> Complete course aligned and edTPA requirements (see above) Understanding of rationale for setting up the classroom (physical space, routines, rules) Participate in development, communication and implementation of classroom management strategies and routines Discuss, understand and participate (when appropriate) in parent-teacher communication (open house and conferences) Exposure to student information system, IEP's, 504 plans, and BIP's within the confidential guidelines of the district Discuss and explore differing strategies to respond to struggling learners Participate in formal and informal professional development and staff meetings Collaborate with co-teachers, aides, grade level teachers, and other school personnel (e.g. speech therapist, nurse) Observe/Talk with teacher about (i) giving meaningful feedback to students and (ii) using knowledge of students to inform planning and instruction (prior knowledge, interests, community, family, culture) <p><u>Clinical Evaluations:</u></p> <ul style="list-style-type: none"> 3 clinical observations with the Observation and Conference Report by the clinical supervisor; 2 by the cooperating teacher 	<p><u>Clinical Requirements aligned with Courses:</u></p> <ul style="list-style-type: none"> EDST 4001 – edTPA & professional portfolio <p><u>Clinical Requirements aligned with edTPA:</u></p> <ul style="list-style-type: none"> Task 1 (Planning): includes (i) context for learning; (ii) development of learning segment (3-5 lessons) focused on comprehension or composition; (iii) development of lesson plans, instructional materials, and assessments, and (iv) complete commentary. Task 2 (Instruction): includes (i) teach/video the learning segment on comprehension or composition and (ii) complete commentary Task 3 (Assessment): includes (i) analysis of whole class learning, (ii) analysis of focus student learning, (iii) analysis of teaching, and (iv) complete commentary. <p><u>Clinical Placement Expectations:</u></p> <ul style="list-style-type: none"> Complete course aligned and edTPA clinical requirements (see above) Elaborate on and continue expectations from the Clinical Practice 1 semester Structured increase of planning and teaching responsibility in all content areas for clinical intern certification (language arts, math, social studies, science) Focus on effectively planning and teaching students with IEP's, 504 plans, and English language learners. <p><u>Clinical Evaluations:</u></p> <ul style="list-style-type: none"> 7 clinical observations (5 O&C and Midterm & Final CCI) by clinical supervisor; all in the focus content area 2 formal evaluations (Midterm & Final CCI) by cooperating/mentor teacher

CLINICAL PLACEMENT PROFESSIONAL REQUIREMENTS CONTRACT

Must be signed prior to each Clinical Placement

Please read the following document carefully. Check each section to indicate your full understanding and acceptance of all responsibilities for your clinical placement. By signing this form, you agree to abide by these associated professional responsibilities. All students who participate in clinical experiences and clinical practice are required by the Department of Educational Studies (EDST) to complete this contract at the beginning of their clinical experiences.

Policy

- ☐ I understand that I am entering a professional workplace as a representative of Seton Hall University and therefore, I agree to abide by the Professional Code of the College of Education & Human Services.
- ☐ I understand that attendance at Convocation is a *mandatory* requirement for all clinical experiences and clinical practice.
- ☐ I will follow the school district's calendar and agree to continue in the district/school until I have completed my required number of weeks/hours.

Communication

- ☐ I understand that *timely* communication with my Cooperating Teacher, Clinical Supervisor, representatives of the Office of Clinical Experiences and other school or university officials is an important aspect of professionalism. I agree to regularly read and respond to email communications and telephone messages sent to me. I will respond to all email messages as soon as possible and *no later than 24 hours* of receipt of a message.
- ☐ If absent or delayed, I will call at an agreed to time between myself, cooperating teacher and clinical supervisor but no later than 8 am on the morning of my absence the following: my Cooperating Teacher, my University Supervisor and the Office of Clinical Experiences. The office can be reached at (973) 761-9347. I acknowledge that I must make up *all* absences, and I realize that failure to do so could result in an "Incomplete" in courses related to my clinical practice and a "Failure" in my clinical practice. As a pre-clinical intern, I am required to complete 60 hours of clinical experience work during each placement prior to clinical practice.
- ☐ If I have problems or questions about my placement, my University Supervisor or my Cooperating Teacher, I agree to contact the Director of the Office of Clinical Experiences at (973) 275-2010.

Documentation

- ☐ For security purposes, I will document my attendance at the main office or security desk at my placement upon arrival and departure. I will also maintain a timesheet that documents the dates and times of my attendance. This timesheet must be signed by a school administrator or my Cooperating Teacher and must document relevant daily activities.
- ☐ I have taken the Mantoux (TB) test, my doctor has read it, a negative result has been clearly documented, and the form has been submitted to the Office of Clinical Experiences and to the school district, if required by my placement.
- ☐ I have completed all pre-requisites for my placement, which include a criminal background check, the Mantoux test, Protecting God's Children workshop and may include a substitute's certification, and/or an interview with the school principal, school

administrators or cooperating teacher. I understand that failure to complete these steps could delay the start of my placement or lead to cancellation of the placement offer.

- ☐ I understand I am required to maintain any required documentation. I will maintain all mandatory documents for successful completion of my clinical practice, *including but not limited to a signed timesheet of hours served in the clinical placement*. I will ask my cooperating teacher to complete my evaluations in order to receive a grade for this clinical placement.

Affidavit of Acceptance of Student Responsibilities

- ☐ I agree to abide by *the Professional Code of the College of Education and Human Services*. I understand that failure to adhere to the *Professional Code* regulations may result in one or more of the following:
- Failing grade for a clinical placement
 - Withdrawal from a clinical placement
 - Additional hours of observation and teaching added to clinical placement
 - Completion of an additional, entirely new clinical placement
 - Referral to the Education Studies Retention Committee for review.

Any of these consequences may delay or prevent completion of degree requirements and/or prevent recommendation for licensure.

- ☐ I have read the Criminal History Background Approval policies in the Clinical Placement Handbook. I understand the offenses in the **N.J.S.A.18A:6-71** statute that guides the NJDOE Criminal History Review process. I also understand that should I have an offense that prohibits me from receiving an approved Criminal Background Check that I will not be eligible for placement.
- ☐ I agree to all of the above requirements. I understand that the Director of the Office of Clinical Experiences may institute additional requirements during the course of my clinical practice because of changes in institutional policies, placement requests and/or New Jersey Department of Education statutes and licensure requirements. Any addendums added to clinical placements will be announced in a timely manner to all students in the Education Studies program.
- ☐ I verify I have read the Clinical Placement Handbook and agree to abide by all of the policies and procedures outlined in the handbook. I understand that failure to do so can result in the loss of placement for the semester, additional hours added on to a placement, completion of an additional placement and/or referral to the Retention Committee.

Print Name: _____ Date: _____

Signature: _____

Semester: _____

Program of Study (ESED, DVSL, ESAB, SCED, SSSED, CEAS): _____