

CALIFORNIA STATE UNIVERSITY, FULLERTON

Spring 20\_\_\_\_\_

Early (Pre-Program) Field Experience Evaluation

Fall 20\_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ CREDENTIAL OBJECTIVE: Multiple Subject

One of the criteria for admission to the program is successful experience working with children and youth (either paid or volunteer). Please indicate your evaluation of the candidate is potential as an effective teacher during his/her hours of classroom observation, below. Please indicate below your evaluation of the candidate's potential as an effective teacher.

NAME OF SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_

DISTRICT/COUNTY: \_\_\_\_\_ Phone #: \_\_\_\_\_

DESCRIPTION OF CANDIDATE RESPONSIBILITIES: \_\_\_\_\_

How long has the candidate worked in a general education classroom under your supervision? \_\_\_\_\_ hours
\_\_\_\_\_ in specialized instruction only (e.g., PE, Music, Art, Special Education, ELL, ect.) \_\_\_\_\_ hours
\_\_\_\_\_ In any other capacity (please specify): \_\_\_\_\_ hours

Approximate number of TOTAL HOURS experienced: Total \_\_\_\_\_ hours

Using the following 5-point scale to evaluate the candidate on the dispositions and abilities listed below

- 5. Outstanding (excellent)
4. Above Average (very good)
3. Average (satisfactory)
2. Needs to Improve
1. No Opportunity to Judge

DISPOSTIONS

Responsible \_\_\_\_\_ Organized \_\_\_\_\_ Responsive \_\_\_\_\_ Enthusiastic \_\_\_\_\_ Flexible \_\_\_\_\_

GENERAL ABILITY

- \_\_\_\_\_ Uses sound judgment. Consider alternatives and consequences before acting
\_\_\_\_\_ Shows resourcefulness, creativity and originality
\_\_\_\_\_ Reflects upon classroom practices and accepts criticism and feedback, thoughtfully
\_\_\_\_\_ Demonstrates a commitment to just, equitable, and inclusive education
\_\_\_\_\_ Takes initiative

If you had children, would you entrust them to this candidate's influence and instruction for a school year? Yes No Maybe

ADDITIONAL COMMENTS: \_\_\_\_\_

Please check your recommendation of program admission:

\_\_\_\_\_ Strongly recommend \_\_\_\_\_ Recommend \_\_\_\_\_ Recommend with some reservations \_\_\_\_\_ Do not recommend at this time

Supervising Teacher Name / Signature / Date
Official Position / \*Work Email / \*Phone Number

\*Contact information required for verification purposes.

The candidate must keep a copy of this form for his/her application to the credential program.