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|  | | | **Single Subject Credential Program**  *Teacher Candidate Improvement Plan*  *Revised 5.2.23* | | |
| *Directions: Plan is developed by the Subject Area Coordinator with input from the University Clinical Coach, Mentor Teacher, and Teacher Candidate. The original, with signatures, stays with Subject Area Coordinator for summary of outcomes and inclusion in candidate file. Attach additional records of observations, conferences, and communications that document concerns. Attach additional documentation as necessary.* | | | | | |
|  | |  | |  | |
| **Candidate** | | **CWID** | | **Date Plan Initiated** | |
|  | |  | |  | |
| **Subject Area** | | **Subject Area Coordinator** | | **University Clinical Coach** | |
|  | |  | |  | |
| **School** | | **District** | | **Mentor Teacher** | |
| **Summary of Improvements Needed (Space will expand as needed)** | | | | | |
| **Candidate Strengths (Identify TPEs)** | | | **Candidate Challenges (Identify TPEs)** | | |
|  | | |  | | |
| **Plan for Improvement (add additional rows as appropriate)** | | | | | |
| Activity | Date activitywill be Initiated | | Indicator of Evidence of Improvement | | Date evidence is to be Submitted |
|  |  | |  | |  |
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|  |  | |  | |  |
| **Signatures/Dates Indicating Approval of Plan Development** | | | | | |
|  |  | |  | |  |
| **Teacher Candidate/Date** | **Subject Area Coordinator/Date** | | **University Clinical Coach/Date** | | **Other (as necessary)** |
| **Results of Improvement Plan Implementation (Space will expand as needed)** | | | | | |
|  | | | | | |
| **Indicators of Improvement are SATISFACTORY**  **Indicators of Improvement are NOT satisfactory** | | | | | |
| **Signatures Indicating Review and Approval of Plan Implementation Results** | | | | | |
|  |  | |  | |  |
| **Teacher Candidate/Date** | **Subject Area Coordinator/Date** | | **University Clinical Coach/Date** | | **Other (as necessary)** |
| **Next Steps (Space will expand as needed)** | | | | | |
|  | | | | | |