

MIDTERM/FINAL EVALUATION FOR ELEMENTARY STUDENT TEACHING
(Completed by Cooperating Teacher and College Supervisor at 3-way conference)

Student Teacher _____ UID# _____

Assignment _____
(School) _____ *(District)* _____

(Area/Level) _____

(Dates) _____

Interactive Phase **7E:190** Recommended Evaluation: *Satisfactory* *Fail*

Pre-/Post-Active Phases **7E:191** Recommended Evaluation: *Satisfactory* *Fail*

Cooperating Teacher Signature

Date

Interactive Phase **7E:190** Recommended Evaluation: *Satisfactory* *Fail*

Pre-/Post-Active Phases **7E:191** Recommended Evaluation: *Satisfactory* *Fail*

College Supervisor Signature

Date