

**Please select appropriate field experience:**

Elementary	Secondary
Practicum <input type="checkbox"/> Student Teaching <input type="checkbox"/>	Art <input type="checkbox"/> ESL <input type="checkbox"/> Science <input type="checkbox"/> Music <input type="checkbox"/> Foreign Language <input type="checkbox"/> Social Studies <input type="checkbox"/> English <input type="checkbox"/> Mathematics <input type="checkbox"/> Special Education <input type="checkbox"/>

**Student Evaluation of College Supervisor**

(To be completed by the Student prior to the final day the student teaching semester. As important feedback this information will be shared with supervisor at the start of a new semester.)

**Name of College Supervisor:** \_\_\_\_\_

Instructions: Please circle the number (1-5) corresponding to the description that most accurately describes your College Supervisor. Feel free to comment on individual items where appropriate.

Scale: N = No Opportunity    1 = Poor    2 = Fair    3 = Satisfactory    4 = Good    5 = Excellent

***The College Supervisor:***

- |   |                    |
|---|--------------------|
| <i>1. Effectively communicated expectations</i>   | <i>N 1 2 3 4 5</i> |
| <i>2. Set a good example as a professional</i>  | <i>N 1 2 3 4 5</i> |
| <i>3. Contributed positively to my field experience</i>   | <i>N 1 2 3 4 5</i> |
| <i>4. Encouraged me to be self-evaluative</i>   | <i>N 1 2 3 4 5</i> |
| <i>5. Provided relevant and useful feedback about my teaching skills</i>  | <i>N 1 2 3 4 5</i> |
| <i>6. Supported me when professional or personal problems developed during my field experience</i>                  | <i>N 1 2 3 4 5</i> |
| <i>7. Maintained an attitude of encouragement and showed interest in my progress</i>                                | <i>N 1 2 3 4 5</i> |
| <i>8. Conveyed his/her expectations and explained them compatibly with the expectations of those of the teacher</i> | <i>N 1 2 3 4 5</i> |
| <i>9. Encouraged on-going communication between my Cooperating Teacher and me.</i>                                  | <i>N 1 2 3 4 5</i> |
| <i>10. Made himself-herself available when needed.</i>  | <i>N 1 2 3 4 5</i> |

**(Please answer the items on the next page.)**

1. **What, in your opinion, does the College Supervisor do that should be continued (i.e., remain unchanged)? Please be as specific as possible.**
  
2. **What, suggestions do you have for your supervisor to improve the effectiveness of his/her guidance?**
  
3. **Additional Comments:**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Submit to:**  
 Office of Student Field Experiences  
 The University of Iowa  
 N310 Lindquist Center  
 Iowa City, IA 52242-1529

**\*\*\*Final grades are contingent upon receipt of this form!\*\*\***

**For office use only**

This evaluation was reviewed with the College Supervisor:      YES      NO      Date: \_\_\_\_\_

By whom: \_\_\_\_\_

Signature: \_\_\_\_\_

Comments:

  

Supervisor Signature: \_\_\_\_\_

Supervisor's Comments: