***Final Evaluation of Practicum Student by the Mentor Teacher – PS 2***

***Department of Initial Teacher Preparation Services***

***Valdosta State University***

**Directions to the Mentor Teacher:** Please complete this evaluation of the practicum student near the end of the practicum. Then review your evaluation with the practicum student by the last visit. Give the evaluation to the practicum student for inclusion in his or her practicum folder. Your commitment and interest in mentoring our students at VSU are appreciated.

**Practicum Student** **Mentor Teacher**

**School Grade Level**

***Directions for Ratings: Descriptions are used to clarify each of the descriptors. A four-point rating scale is used to indicate the performance of each descriptor.***

 **Level 1 = Indicator Not Demonstrated**

 **Level 2 = Indicator Partially Demonstrated**

 **Level 3 = Indicator Adequately Demonstrated**

 **Level 4 = Indicator Effectively Demonstrated**

\_\_\_\_\_ 1. Knowledge of content

\_\_\_\_\_ 2. Ability to help students make connections to prior knowledge, everyday lives, and other subjects

\_\_\_\_\_ 3. Responsive to students’ intellectual, social, physical, and personal developmental needs

\_\_\_\_\_ 4. Professional rapport with students

\_\_\_\_\_ 5. Positive role model for students

\_\_\_\_\_ 6. Classroom management during instruction

\_\_\_\_\_ 7. Verbal communication skills

\_\_\_\_\_ 8. Written communication skills

\_\_\_\_\_ 9. Creativity in lesson design and implementation

\_\_\_\_\_ 10. Ability to design lessons based on Georgia Early Learning and Development Standards
 (GELDS) or Georgia Standards of Excellence

\_\_\_\_\_ 11. Ability to use a variety of appropriate materials, resources, and technology

\_\_\_\_\_ 12. Overall performance

\_\_\_\_\_\_13. Ability to work with children (individual students, group of students, and/or the whole

 class)

NARRATIVE COMMENTS: Include overall areas of strength, areas for improvement, and impressive performances that are not on the list on the back or on another sheet of paper.

Mentor Teacher’s Signature and Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Practicum Student’s Signature and Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_