

Nyack College School of Education

Faculty Recommendation for Disposition Form

Student's Name _____ Faculty Name _____

This student is applying for student teaching. Your comments will assist in guiding this student to a successful professional career in teaching.

Coursework Evaluations:

Course Number (s) - _____ Grade: _____
_____ _____
_____ _____

Professionalism

5----4----3----2----1----NA
5----4----3----2----1----NA
5----4----3----2----1----NA

Above Average Below Average
Average Average Average

Summative Evaluation

- | | |
|---|-----------------------------|
| 1. Knowledge & Skill in Pedagogy | 5----4----3----2----1----NA |
| 2. Interest/Commitment | 5----4----3----2----1----NA |
| 3. Responsible/Dependable | 5----4----3----2----1----NA |
| 4. Organization and Management | 5----4----3----2----1----NA |
| 5. Oral Communication | 5----4----3----2----1----NA |
| 6. Written Expression | 5----4----3----2----1----NA |
| 7. Knowledge of Subject Matter | 5----4----3----2----1----NA |
| 8. Timely Completion of Assignments | 5----4----3----2----1----NA |
| 9. Ability to Accept Constructive Criticism | 5----4----3----2----1----NA |
| 10. Interpersonal Skills | 5----4----3----2----1----NA |
| 11. Ability to Relate to Children | 5----4----3----2----1----NA |
| 12. Class Attendance | 5----4----3----2----1----NA |
| 13. Punctuality | 5----4----3----2----1----NA |
| 14. Attitude and Demeanor | 5----4----3----2----1----NA |

In my opinion, I Strongly Recommend _____ this student for student
Recommend _____ teaching.
Recommend with Reservation _____
Can Not Recommend _____

Additional Comments: Strengths and/or weaknesses relative to this student's success in the teaching profession. (Over)

Signature: _____ Date: _____

Please return directly to Director of Student Teaching- Susan Bucci
School of Education

