Teacher Certification Program: Clinical II

Name ________________________________________________ Certification (e.g. English) ____________________

Cooperating Teacher ________________________________ Semester/Year ____________________

Clinical II: The second 30 hour clinical experience is completed with or immediately before EDU 410/808 General Methods, your final course prior to student teaching. If you take your final course (EDU 410/808 General Methods) in the summer, you should complete this clinical experience during the spring semester immediately before the summer session. If you complete EDU 410/808 General Methods during the fall or spring, you should complete this clinical experience with the General Methods course.

The Clinical II experience is 30 hours to be completed over the course of the semester. There are several options for completing the 30 hours:

- Spend two hours/week for 15 weeks at your school placement
- Spend three hours/week for 10 weeks at your school placement
- Spend four hours/week for 8 weeks at your school placement
- Spend five hours/week for 6 weeks at your school placement

Your cooperating teacher will provide direct supervision for all aspects of your Clinical II experience. At the conclusion of your Clinical II experience, document your time and the activities you completed. Your cooperating teacher will also complete a final assessment. The item marked with a * is assessed by your cooperating teacher using the rubric provided by Providence College. The item marked with ** should be reviewed by your cooperating teacher before sending distributing to parents.

Planning and Teaching
From Clinical I:

☐ Circulate and assist individual students
☐ Circulate and work with small groups of students; support group work
☐ Plan and teach a mini-lesson or a portion of a lesson

Clinical II: All of the items listed for Clinical I, plus:

☐ Plan, teach and assess at least two full whole class lessons that include differentiation and/or other strategies for supporting diverse learners (e.g. students with disabilities, students who are gifted/talented, students who are English language learners, students who are homeless)*
☐ Present a demonstration (if appropriate for the discipline)
☐ Pre-teach, review or re-teach a lesson or portion of a lesson
☐ Plan for and facilitate a class discussion
☐ Plan for and facilitate group work, cooperative learning and/or group presentations
☐ Plan for and facilitate laboratory work (for the sciences)
Assessment
From Clinical I:

☐ Informally assess students during discussion, group work, labs, etc. and document assessment findings

Clinical II: All of the items listed for Clinical I, plus:

☐ Practice grading student work and providing feedback using different tools (e.g. rubrics, checklists, narrative comments)
☐ Design (or select and adapt), administer and score a performance/presentation assessment
☐ Design (or select and adapt), administer and score a product assessment

Management and Classroom Environment
From Clinical I:

☐ Take attendance at least once
☐ Manage transitions within the class period at least once
Optional:
☐ Conduct routine homeroom procedures

Clinical II: All of the items listed for Clinical I, plus:

☐ Manage the transitions at the beginning and end of class (e.g. conduct the “do now” warm up activities, assign homework, supervise class dismissal)
☐ Monitor halls during transitions (with the cooperating teacher)
☐ Prepare a bulletin board or other display
☐ Assist with planning for classroom design/rearrangement (if applicable)

School-Home Communication
From Clinical I:

☐ Prepare a letter to introduce yourself to parents (as a Clinical I student) and distribute it as recommended by your teacher**

Clinical II: All of the items listed for Clinical I, plus:

☐ Help prepare for Parents’ Night/Open House activities (if scheduled)
☐ Attend Parents’ Night/Open House [if your schedule permits]
☐ Update or assist with updating the class web site (if used)

Student Support Services
Clinical II:

☐ Interview and observe (if permitted) at least one student support service provider (e.g. reading specialist, school nurse, guidance counselor, ESL teacher, special education teacher, resource officer)

TCP Student signature ___________________________ Date ____________

Cooperating teacher signature ___________________________ Date ____________