

TEXAS WOMAN’S UNIVERSITY
COLLEGE OF PROFESSIONAL EDUCATION (COPE)
Clinical Student Teacher Standards

Dear Texas Woman’s University Field Supervisor,

Please complete this documentation form each time you are concerned about a clinical student teacher’s progress/behavior, including academic, interpersonal, ethical, etc. Send your documentation information to the Office of Clinical Practices, Texas Woman’s University, P. O. Box 425769, Denton, TX 76204-5769.

Date _____

Student Name _____

Cooperating Teacher _____

University Field Supervisor _____

School _____

Description of Concern or Incident

Intervention

Include guidelines for improvement discussed with student,
and a copy of the “Student Success Plan for Improvement.”

TEXAS WOMAN'S UNIVERSITY
COLLEGE OF PROFESSIONAL EDUCATION (COPE)
Student Success Plan for Improvement

Student Name _____

Cooperating Teacher _____

University Field Supervisor _____

School _____

My understanding of the problem:

Steps I will take for improvement: (attach other pages as needed)

Instruction

Communication

Professional Development

Compliance with Policies/Procedures

Management of Time/Materials

Other Areas for Development

Time-line of action:

Student Signature: _____

University Field Supervisor Signature: _____

Chair/Associate Dean Signature: _____