

**EIEd 3111: PRACTICUM 1: FIELD EXPERIENCE IN THE ELEMENTARY CLASSROOM
COOPERATING TEACHER MID-SEMESTER EVALUATION**

Student Name _____

Cooperating Teacher _____

School Dist/School _____

Please place a check in the appropriate box to indicate progress in the fall practicum

	Excellent	Satisfactory	Needs Work
Interaction with students			
Attitude toward teaching/students/faculty			
Willingness to assist or participate			
Punctual/Completes tasks on scheduled time			
Demonstrates professionalism			
Written and oral communication			

Additional Comments: Please provide any additional information on the student's strengths and weaknesses, so at this time assistance can be offered to the student.

Signature, Cooperating Teacher

Date

Please return this form, **before October 27, 2008**, to your practicum student or mail to:
Pat Nelson, Division of Education, University of Minnesota, Morris, MN 56267