BATES COLLEGE — FIELD EXPERIENCE EVALUATION

Return via the student or by email to pbuck@bates.edu, acharles@bates.edu, bsale@bates.edu, or mtieken@bates.edu as appropriate. This evaluation will be shared with the student.

Year ______ Fall _____ Winter _____ Short Term _____

Student _______________________________ Host Teacher _______________________________

Bates Course Educ _____________________ School _________________________________

Bates Instructor _______________________ Grade/Subject ___________________________

** Please note that we will make copies of this form for the student and the department file. Also be aware that the student will not receive a grade or course credit until we have your assessment. Thus, we would appreciate your returning this form no later than December 1 (fall), April 1 (winter), or the Wednesday before Memorial Day (short term). Thank you very much.

► Please check the roles that best describe the Bates student's participation in your class:

Observer___ Teaching Assistant ___ Tutor ___ Clerical ___ Helper ___ Researcher ___ Other _____

► Approximate number of hours the student has/will have completed at the end of the field placement:

More than 30 hours ____ 30 hours ____ Fewer than 30 hours ____

Please circle a rating for each of the following categories and comment.

► Professionalism 4 Always 3 Frequently 2 Occasionally 1 Rarely
   (e.g. grooming, responsibility, courtesy, reliability, and dependability)
   Comment welcome:

► Effective Interpersonal Skills 4 Always 3 Frequently 2 Occasionally 1 Rarely
   Comment welcome:

► Initiative and Self-Direction 4 Always 3 Frequently 2 Occasionally 1 Rarely
   Comment welcome:

► OVERALL ASSESSMENT (see Guidelines for Field Experiences for information about expectations)

4 Exceeds expectations 3 Meets expectations 2 Partially meets expectations 1 Does not meet expectations

Strengths:

Suggestions for Improvement:

** I am willing to host another Bates student. Yes No Maybe Please add suggestions for us on reverse.

_____________________________ ___________________________
Host teacher's first and last name (printed) Signature (not needed for emailed form)  Date _____________