

Early Childhood Professional Experience Year 2 EDU2002

Pre-Service Teacher		Dates of Professional Experience	
Early Childhood Setting		Age group	3-5 year-olds
Supervising Teacher		Dates of Absence	
Month/Year		No. of Days Completed	
<i>Pre-service teacher to complete:</i>			
LTU ID		Year Level	2
Home Campus		Subject	EDU2002

Please assess the pre-service teacher as a NOVICE: new to, and inexperienced in the profession.

Use the following ranking in your evaluation in column 2:

M – Meets expectations. D: Does not meet expectations. N/A: Not applicable.

Professional Knowledge	Ranking M, D, N/A	Comments
Participates effectively & appropriately in an early childhood setting [APST 1]		
Uses relevant curriculum documents to support planning & assessment processes [APST 2]		
Designs individual/group learning experiences based on the children's interests & capabilities [APST 1]		
Understands impact of the diverse needs of children & applies this to planning [APST 1]		
Responds to the legal & ethical requirements for working with parents & children [APST 1]		
Professional Practice		
Is able to interact effectively with the children & their parents [APST 3]		
Writes detailed & meaningful observation notes as a basis for assessment & planning [APST 5]		
Plans for a safe but challenging environment for all children [APST 4]		
Uses assessment as an indicator of strengths, achievements & ongoing progress [APST 5]		
Employs materials, resources & technologies effectively to promote learning [APST 3]		
Professional Engagement		
Responds to advice in order to develop teaching approaches & strategies [APST 6]		
Demonstrates effective organisational & administrative skills [APST 7]		
Shows initiative, is willing to accept responsibility [APST 7]		
Works with the early childhood setting team to provide an optimum learning environment for children [APST 7]		
Communicates well with parents & staff [APST 7]		
Is reliable & punctual [APST 7]		

Please complete the overall rating and general comments over the page.

Overall Rating: What is your overall assessment of this pre-service teacher? Please mark the appropriate box.

- Meets expectations
- Does not meet expectations

General Comments:

Strengths

Areas that need improvement

Pre-Service Teacher Signature _____

Date _____

Supervising Teacher Signature _____

Date _____

NOT FOR SUBMISSION