Student Teaching Final Narrative/Final Recommendation

Candidate’s Name: ___________________________  Date: __________________

Subject Area: ___________________________  Grade Level: __________________

School Name: ___________________________  School Corp: ___________________________

PLEASE TYPE

This narrative should be reasonably detailed, complete, and accurate, including reference to specific examples of the teacher candidate’s skills. It should address the teacher candidate’s abilities and readiness in all aspects of teaching. If there are areas for improvement, these too should be mentioned. This summary represents your recommendation of the teacher candidate’s potential as a member of the profession. You are welcome to use this form, or to create this document using the word processing program of your choice, and printing on plain paper or your school’s letterhead. Whichever method you use, please remember to sign this document and send copies of it to the Office of Clinical Experiences, the university supervisor, and the teacher candidate.

Your Name: ___________________________

☐ University Supervisor  ☐ Supervising Teacher

Your Signature: ___________________________

Copies sent to: Office of Clinical Experiences, University Supervisor/Supervising Teacher, and Teacher Candidate