Evidence 3.3.6 Disposition Improvement Plan

NKU TEACHER CANDIDATE IMPROVEMENT PLAN

Teacher Candidate Name: _________________________________  Date: ____________

To continue to progress toward receiving your teaching license in ________________ program, you are required to demonstrate the following dispositions and professional behaviors expected of newly-hired, first-year professional educators. Based on evaluations from Course Instructor(s), the following attributes have been noted as area(s) needing improvement.

A. Professional Behaviors expected in Field Experience placement or Coursework:

☐ Display positive attitude
☐ Take initiative
☐ Demonstrate enthusiasm for the work of teaching and learning
☐ Show respect for classmates, colleagues, instructors, families, and communities
☐ Maintain confidentiality
☐ Demonstrate flexibility
☐ Maintain professional boundaries
☐ Build rapport with PK-12 students, classmates, and instructors
☐ Demonstrate punctuality in all professional responsibilities including coursework
☐ Dress professionally
☐ Other __________________________________________________________

B. Professional Dispositions expected in Field Experience placement or Coursework:

☐ Recognize individual PK-12 student’s strengths and then builds on those strengths to enhance the learning of all students
☐ Foster each PK-12 student's deeper understanding of the content through relevant learning experiences
☐ Self-analyze and persevere to improve instructional practices
☐ Respond positively to circumstances that challenge his/her own frame of reference (e.g., culture, gender, language, abilities, ways of knowing)
☐ Collaborate with colleagues, classmates, families, and professionals (e.g., teachers, community members) to promote PK-12 student learning
☐ Other __________________________________________________________

To be considered for continuation in the program, the Teacher Candidate will provide evidence for meeting the conditions outlined in the action steps and timelines below. The determination of whether

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these conditions have been met as well as the next steps will be decided by the program faculty and Department Chair. Depending on the decision of the program faculty and chair, the following actions can be taken:

a. Continuation in the program
b. Complete additional action steps
c. Removal from the (insert name of course) course for the remainder of the semester and will result in a grade of “F”
d. Suspension from the (insert name of program) program for one or more semester
e. Dismissal from the education program.

<table>
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<tr>
<th>Action steps</th>
<th>Timeline (Completion Due Date)</th>
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I understand and agree to the above conditions (i.e., action steps and timeline for completion). I understand that I can appeal this plan prior to signing the agreement/plan. I also understand the program’s retention policy and am clear that there are certain behaviors that, if violated, can supersede this agreement and may result in immediate removal from the program (e.g., ethics violations).

__________________________________________  _________________________________________________
Date                                           Teacher Candidate Signature

__________________________________________  _________________________________________________
Date                                           University Instructor/Clinical Educator Signature

__________________________________________  _________________________________________________
Date                                           Director of Admissions Program Signature (if applicable)

__________________________________________  _________________________________________________
Date                                           Program Facilitator Signature (if applicable)

__________________________________________  _________________________________________________
Date                                           Department Chair Signature (if applicable)

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