 **PROFESSIONAL EXPERIENCE: AT RISK NOTIFICATION**

**Pre-Service Teacher Name:** ………………………………………………………….

**Site:** ………………………………………………………**Date:** ………................

*After observation of your teaching and discussion, the following aspects of your current performance are brought to your attention:*

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| **PROFESSIONAL RELATIONSHIPS: Strengths and areas for improvement** |
|  |
| **PROFESSIONAL KNOWLEDGE: Strengths and areas for improvement** |
|  |
| **PROFESSIONAL PRACTICE: Strengths and areas for improvement** |
|  |

***These issues need to be achieved to complete this placement satisfactorily.***

University Liaison Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mentor Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Site coordinator Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***I have read the above and understand the site’s concerns.***

Pre-service Teacher Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Improvement review date | Achieved /Not Achieved | Name and Signature: |