Career in Teaching Intern Report on Mentor

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| Intern’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Mentor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | First Intern Report on Mentor   Second Intern Report on Mentor |

Please briefly describe in the box below how your CIT Mentor has supported you during your internship. As part of your narrative, please include specific examples of support and/or any specific areas in which you would like additional mentor support. If you need more space, please use another sheet of paper. On the back of this form, indicate specific mentoring activities your mentor has done to support you.

If you have concerns that you would prefer to share confidentially with the CIT Director, please contact the CIT Office (585-262-8541, [CIT@rcsdk12.org](mailto:CIT@rcsdk12.org)).

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**Please complete page two of this form.**

**Please place an ‘X’ in the small boxes next to the activities your mentor has done to support you.**

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|  | **PLANNING AND PREPARATION** |
|  | Reviewed Professional Goals |
|  | Helped to identify important concepts of the discipline |
|  | Helped to understand how to incorporate knowledge of students into planning. |
|  | Helped to understand how to set instructional outcomes |
|  | Discussed/Reviewed NYS Content Standards and helped to develop lessons aligned with standards Assisted with designing coherent instruction for diverse learners |
|  | Reviewed/Assisted in understanding RCSD Curriculum |
|  | Helped to procure and understand how to utilize resources |
|  | Helped to understand how to design formative assessments that correspond to instructional outcomes and that guide planning |

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|  | **CLASSROOM ENVIRONMENT** |
|  | Collaborated/Consulted about ways to create an environment of respect and rapport |
|  | Collaborated/Consulted about ways to establish a culture for learning |
|  | Suggested routines and procedures that support student learning |
|  | Suggested ways to manage student behavior |
|  | Suggested ways to organize physical space to promote learning |

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|  | **INSTRUCTION** |
|  | Collaborated/Consulted about ways to communicate with students (eg. clarity of lesson purpose, clear directions for activities, explanation of content, etc.) |
|  | Collaborated/Consulted about using effective questions and discussion techniques designed to promote student thinking and understanding |
|  | Suggested strategies for how to engage students  in learning |
|  | Suggested ways to use assessment regularly during instruction in order to diagnose evidence of learning |
|  | Suggested learning experiences that promote autonomy, interaction or choice |
|  | Helped to analyze student work |
|  | Helped to develop IEP as needed |
|  | Modeled a lesson |
|  | Co-taught a lesson |

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|  | **PROFESSIONAL RESPONSIBILITIES** |
|  | Asked me questions to help me assess the effectiveness of lessons and to help me reflect on ways to enhance lessons |
|  | Explained how to maintain accurate records about student progress |
|  | Suggested ways to communicate/involve families to support student learning |
|  | Encouraged and suggested ways to participate in school and district projects |
|  | Recommended professional development to enhance content knowledge and pedagogical skill |
|  | Encouraged collaboration with colleagues |

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| The frequency of visits and contacts from my mentor  is consistently appropriate to my needs.  is appropriate to my needs most of the time.  is more frequent than I feel is necessary.  is not frequent enough to meet my needs. I need my mentor to visit and contact me more often. | My mentor provides written feedback (Feedback Forms and other written feedback)  regularly, and it is helpful (highlights positives, focuses our efforts, identifies next steps, etc.).  sometimes, and it is helpful.  regularly or sometimes, but it is not particularly helpful.  sporadically, not very often, and/or not at all. |

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## Intern’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Mentor’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Mentors should turn in this signed form with the signed Intern Status Report to the CIT Office, CO-2***