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| ***Career In Teaching Program - Review of Written Records*****Note: This review is to be completed by a CIT Panel Member for inclusion in the CIT file.** |

Lead Teacher Assigned as Mentor **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date of Review **\_\_\_\_\_\_\_\_\_\_\_**

Reviewed by **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| Records | Comments |
| **Calendar****\*share with Panel Member** | [ ]  Reviewed with Mentor today.[ ]  Updates monthly on CIT Google Classroom.[ ]  Will update by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .[ ]  Was unaware of requirement or unable to complete. | Notes on Calendar: |
| **Mentor Log(Mentor’s green spiral or equivalent, notes, correspondence, etc.)** | Notes on Log/Note-taking: |
| **Written Feedback for Intern****(Feedback forms, etc.)** | Notes on Written Feedback: |
| **Copies of Intern Status Reports,** **Intern Reports on Mentor, and Status Report Reviews** | [ ]  Complete and Signed [ ]  Missing Items (explanation)[ ]  Organized Record-keeping | Notes on record-keeping: |
| **Professional Development Log*****(Workshops attended and/or presented)*****\*share with Panel Member** | [ ]  Mentor PD Log Total Hours \_\_\_\_\_**Attach PD Log to this form.** | Notes on Mentor PD: |
|  **Panel Observation** | [ ]  Conducted by **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Not conducted (explanation) |
| **Peer Observation** | [ ]  Conducted by **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Not conducted (explanation) |
| **Mentor Self-Assessment****(for New Mentors only)****\*share with Panel Member** | [ ]  Submitted today [ ]  Already sent to CIT [ ]  Will send to CIT by June 15th  |  |
| **Intern Final Reports****\*share with Panel Member** | [ ]  Reports Complete and Ready to Review [ ]  **Panel Member reviewed Reports with Mentor**[ ]  Missing Reports (explanation) |  |
| **Other Comments** |  |

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| **Quality of Written Records**[ ]  Proficient [ ]  Needs Improvement |

CIT Reviewer’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_

 LT/Mentor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_

**A LT-Mentor may attach a written response to this form. Please return signed form to CIT Office, CO-2.**