



CLINICAL EXPERIENCE HANDBOOK

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Clinical Experience Handbook

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*The School of Education and Health Sciences in conjunction with the University of Dayton's Habits of Inquiry & Reflection document has adopted a school wide theme of "Building Learning Communities through Critical Reflection." The conceptual framework of the School of Education and Health Sciences **embraces diversity** for the promotion of social justice, and engages in **building a community** where the faculty model and interns develop as **scholar practitioners** who engage in **critical reflection**. All four outcomes are addressed in this clinical experience.*

The University of Dayton's Teacher Education Programs have adopted a theme that is integrated throughout our entire program of study. The theme of "Teacher as Reflective Decision Maker in a Pluralistic Society" is an appropriate choice, considering that the complex needs of students from many different backgrounds demand that teachers have as much preparation for this challenge as possible.

The School of Education and Health Sciences and the Teacher Education Programs have adopted these themes in accordance with the university's Marianist Mission Statement, which encourages students to take an active role in improving the state of the larger community. This attitude is encouraged when professors and teachers embrace and model qualities of character embodied in the Marianist tradition. These values, found as well in all classrooms, include respect, acceptance, empathy, authenticity, service, compassion, a sense of humor, expectancy of good, concern for the total development of the child and a commitment to be professional minded. The characteristics of a Marianist education; educate for formation in faith, provide an integral quality education, educate in family spirit, educate for service, justice and peace, and educate for adaptation and change are integrated throughout your University of Dayton education, and may also become a part of your educational philosophy as a teacher.

This experience supports the Ohio Standards for the Teaching Profession (OSTP), which includes knowledge, skills, and performances addressing: Students, Content, Assessment, Instruction, Learning Environment, Collaboration and Communication, and Professional Responsibility and Growth. The experience also aligns with the departments standards, which are based on the InTASC (Interstate New Teacher Assessment and Support Consortium) Standards, and as such prepares beginning teachers to think about teaching and student learning. This is especially effective when considering and assessing the individual needs of students in a diverse student population.

Definition of Terms:

Clinical Educators – Licensed practitioners in P-12 schools who provide instruction, supervision, and direction for interns during field-based assignments.

Clinical Experience –The internships that provide interns with an intensive and extensive culminating activity. Interns are immersed in the learning community and are provided opportunities to develop and demonstrate competence in the professional roles for which they are preparing.

Clinical Experience Coordinator – The faculty responsible for coordinating the clinical experience for individual licensure programs.

Intern – An individual under the supervision of a liaison and a clinical educator immersed in their preservice clinical experience.

Liaison – Higher education faculty responsible for instruction, supervision, and assessment of interns during field experience and clinical practice.

The Clinical Experience Program

The clinical experience internship year is a guided experience to prepare individuals for the profession of teaching. It is an opportunity to work under the mentorship of a qualified teacher who has had at least three years of successful teaching experience. Initial licensure clinical experience may extend over an entire semester or some portion of a semester, depending upon the prior experience of the intern. Program faculty may extend the clinical experience.

- Interns are required to complete their clinical experience in the Miami Valley
- Interns must complete and have a clear BCI& I and FBI background check before their clinical experience
- Interns will not be permitted to complete their clinical experience in the district where they graduated
- Interns will not be permitted to complete their clinical experience in a district where family members attend, teach or are employed in the school district

General Guidelines/Course Objectives for the Clinical Experience

The intern transitions through the developmental stages of observer, participant, co-teacher, and finally, teacher. These roles are not discrete. Interns continue to observe throughout the experience and will be participating by the second week of the semester. Each licensure program may share specific guidelines for implementation of the different aspects of the clinical experience.

Observation. Observation is an active and on-going process. The intern must observe with a clear purpose in mind: where materials are kept, classroom management techniques, how individual students respond to the teacher, what motivates students, etc. It is important to record observations. Observations should extend into classes taught at grade levels or in subject fields other than those of the clinical educator. The intern should become thoroughly acquainted with the students, school, administrative routine, and the school's community. (OSTP 1, 2, 3, 5, 6 & 7)

Participation. The intern is expected to observe and participate actively in the classroom situation in accordance with the clinical educator's schedule. Participation may include helping individual students who are having difficulties; monitoring small groups; assisting with routine tasks; keeping records; preparing teaching materials; checking written work; preparing and using technology; and supervising in the hall, lunchroom, library, and playground. Usually, it is better for the intern to be given responsibility for participating in some activity with the entire group (during a brief period) no later than the end of the first week. (OSTP 1, 2, 3, 5, 6, & 7)

Co-Teaching. The intern should consider co-teaching for a period of time with the clinical educator before assuming the principle role of teacher. Co-teaching will assist the intern in making the transition between participation and full responsibility teaching. (OSTP 1, 2, 3, 4, 5 & 7)

Teaching. The intern should assume the principle role of teacher at a time determined jointly by the intern, the clinical educator, and the liaison. It is expected that, through gradual induction, the intern will assume complete responsibility by the end of the assignment. The timeline for assuming the teaching responsibility should be established no later than the second week of the experience. This responsibility should be assumed gradually, culminating in full responsibility. Each licensure program and individual placement varies; therefore, it is best to check the specifics of this requirement with your licensure coordinator. (OSTP 1, 2, 3 & 4)

Professional Content Standards

During the clinical experience, interns must be assessed utilizing the various professional programmatic standards. Liaisons will share these assessments with clinical educators.

Attendance

Undergraduate and post baccalaureate interns are expected to complete a full semester (15 weeks) as required by the State of Ohio. Interns must make up all absences. **However, you should be aware that performance competence is the final determinant of length of the clinical experience.** Interns must earn a satisfactory evaluation to be recommended for licensure.

Interns are expected to be present in the school each day the assigned school is in session. Attendance is expected except in the case of personal illness or emergencies. The intern must contact the school, clinical educator, and liaison if it is necessary to be absent.

In case of extended and/or unexcused absences, the intern must notify the **Educational Field Office**. The review team comprised of the Educational Field Office personnel and the Senior Year Internship Experience Coordinator will consider three alternatives: 1) extend the clinical experience an appropriate length of time; 2) ask the intern to withdraw and re-enroll in a later term; 3) withdraw the intern from their clinical experience and the program. The decision of the review team will be communicated to the liaison, who will notify the student of the decision.

It is the School of Education and Health Sciences Profession's policy that interns follow the calendar of the assigned school. In the event that school and university holidays do not coincide, interns observe the schedule of the school system.
(OSTP 7)

Teacher Professionalism

The intern should acquire an understanding of all of the expectations of teaching. It is important for the intern to learn about record keeping, evaluation, correspondence with families, and other aspects of teaching directly from the clinical educator. Mentoring conversations about the many dimensions of teaching, held after school, should be limited to one or two times per week and arranged at the convenience of both the teacher and the intern. It may be helpful to arrange for one consistent day each week to work after the regular school day. Exceptions are opportunities to attend family conferences, faculty meetings, professional development experiences, athletic or other extra-curricular activities sponsored by the school. (OSTP 6, 7)

Lesson Planning

The intern must become familiar with the students' background knowledge and experiences prior to preparing lessons for the students. It is equally as important to have a thorough understanding of curriculum and the instructional plan of the entire year (past, present and future) before writing lesson and unit plans. It is expected that the intern will prepare daily lesson plans and submit them to the clinical educator prior to teaching for feedback and approval before proceeding with teaching the lessons.

The intern must incorporate learning objectives that are appropriate for all of the students. The plan must also include teaching methods, activities, instructional materials and evaluation strategies that are aligned with the objectives of the lesson. The intern is expected to maintain a file of daily lesson plans and make it available to the liaison when visits to the class are made. Lesson plan formats provided by the university are to be used during observation.
(OSTP 1, 2, 3, 4, 5)

Reflection

In keeping with the departmental theme, of “Teacher as a Reflective Decision Maker in a Pluralistic Society,” (Teacher Education) and “Reflective Decision Maker” (Health and Sport Science) the intern will be required to reflect on lessons taught. The intern may be required to keep a reflective journal. (OSTP 7)

Conferences

Conferences should be held weekly between/among intern and clinical educator in an appropriate setting. These discussions may be about a variety of topics: school philosophy, policies and procedures; professional ethics; planning and preparation; individual needs of students; curriculum; teaching materials; methods; evaluation; the community and parental participation in the school program; continuous self-reflection and evaluation; and cooperative assessment of the internship experience by clinical educator and intern.

The clinical educator and liaison should confer and document intern growth periodically because they share responsibility for mentoring the intern. (OSTP 6)

Clinical Experience Seminars for Interns

Interns are required to attend all seminars, both Educational Field Office and program-specific seminars. A schedule of the seminars is available at the beginning of the semester. This schedule should be shared with the clinical educator so they are aware if the intern may need to be excused in order to be prompt for the seminars. (OSTP 6, 7)

Course Load and Work

All interns are to follow their school faculty’s contracted hours. If additional course work is required, interns should not carry more than one additional course with their clinical experience. If interns need to work during their clinical experience, work hours must be limited so as not to interfere with a successful clinical experience. The intern should notify the clinical educator and liaison if taking a course during this semester or work needs to be continued. (OSTP 7)

Expectations of Personnel

The clinical experience internship can be of maximum benefit to the intern, clinical educator, and students in the schools when all involved work together during this critical experience in the professional development of educators.

Expectations of the Intern

The intern realizes the opportunity that will be provided learning from the expert mentoring of a veteran teacher. This is a privilege for the intern and should be so regarded.

As the principle beneficiary of the efforts of all persons involved in the clinical experience program, the intern is responsible for:

Orientation

- Learning students' names
- Demonstrate various classroom management strategies
- Acquainting the clinical educator with any personal background, health considerations, interests, and ambitions not on the *Personal Data Record* that is provided when the assignment is made
- Completing a medical card and wear it every day on the UD ID lanyard or school ID
- Observing the time and holiday schedule of the school

Instruction

- Becoming familiar with the long-range and unit plans used by the clinical educator
- Being prepared to take over the class at any time, without warning
- Completing daily lesson plans including various teaching techniques, student groupings, appropriate modifications and use of technology. All lesson plans must be made available to the clinical educator for input and suggestions

Assessment and Evaluation

- Keeping a written reflection and evaluation of one's own work as an intern, striving to effect improvement
- Creating and implementing a capstone experience, as directed by your program requirements.

Collaboration and Professional Development

- Discuss, evaluate and defend various professional issues pertaining to the field of education
- Behaving as a professional in relation to the expectations of the school
- Using good judgment about dress, grooming, and personal habits, being sure to adhere to the school policies
- Holding information about teachers, students and home situations in strict confidence
- Becoming acquainted with the professional and service personnel in the school
- Taking the initiative in seeking help from the clinical educator
- Meeting all responsibilities promptly and effectively, especially notifying the liaison, clinical educator, and/or school if any emergency arises that require absence from school
- Assisting with extra-class activities beyond school hours, on a limited basis, not exceeding twice per week, such as (a) attendance at an athletic event or dramatic production; (b) family conferences; (c) extra-curricular activities
- Attending conferences with clinical educator and liaison when scheduled
- Showing readiness and initiative to assume increasing responsibility as the semester progresses
- Recognizing that one of the conditions of all clinical experience assignments is that the best interests of the P-12 children must always be the first priority
- Observe another teacher's classroom(s) and reflect on his /her/their practice
- Participating in all clinical educator responsibilities during school hours, such as hall, lunchroom, and study hall supervision
- Realizing that an intern is permitted to carry the delegated responsibilities only as long as good ethical and professional conduct is maintained, and recognizing that the intern serves under the direction of the clinical educator, the principal, and the liaison
- Communicates regularly with clinical educator and university (telephone, email, etc.)

Expectations of the Clinical Educator

The clinical educator is a classroom teacher who accepts responsibility for the daily mentoring of an intern, and is the major influence in making the intern's experience successful. The most effective mentor is one who has a strong sense of efficacy about the influence of teachers on student learning. Good interpersonal skills, broad background knowledge in content and pedagogy, varied instructional techniques, and an emphasis on the importance of planning are characteristics of effective mentors. The clinical educator is responsible for:

Orientation

- Becoming acquainted with the background of the intern. A *Personal Data Record/Professional Statement* containing pertinent information is provided for this purpose
- Creating a welcoming atmosphere conducive to a harmonious working relationship with the intern
- Orienting the intern to the school. This includes helping the intern become acquainted with administrators, teachers, students, and service personnel. It involves helping the intern become familiar with available instructional facilities, resources, and technological equipment. It includes some understanding of the community and awareness of guidance and special education faculty and facilities, fire drills and other emergency procedures, holidays and special functions

Instructional Support

- Orienting the intern to the work of the classroom. This includes helping the intern understand the curriculum pattern, the long-range plan for the particular group of students, the plan of the current unit, and the grading system. An understanding of the individual needs of the students including some special study of individual student records is vital if the intern is to approach with understanding the task of guiding the learning experience of the group
- Finding ways for the intern to assist in the classroom as soon as possible after arrival. Every intern needs to feel useful and a part of the ongoing program in the classroom. Assisting from time to time even in minor tasks during the initial observation phase and co-teaching in the transition stage are important
- Providing an increasing number of opportunities for the intern to assume more responsibility for the work of the different classes, gradually working up to full responsibility.
- Giving instructions and guidance to the intern in private conferences, refraining from interrupting while the intern works with the students. If the necessity should ever arise for the clinical educator to take control, it should be done in such a manner that the intern's pre-professional status is honored
- Being present in the classroom a majority of the time while the intern is teaching to provide an adequate basis for evaluation. Absences are needed, however, to provide the intern with a realistic experience. They should be planned in consideration of the needs and the safety of the students and the demonstrated competence of the intern. The clinical educator always retains full authority and legal responsibility of what happens in the classroom and can delegate responsibilities only temporarily to the intern. Interns are generally not held liable for injury or damages. However, as a precautionary measure, they are covered by the university's liability insurance policy

Assessment and Evaluation

- Recording observations using the Ohio Standard for the Teaching Profession based observation form and/or other forms tied to specific licensure programs. These should be shared with the intern in the post-observation interviews providing written feedback specific to the intern's teaching acts and interactions
- Informing the intern of his/her academic progress frequently using reflection tools from each respective program during clinical experience
- Supervising and mentoring the intern while documenting their growth over time with sufficient frequency to secure a reasonably accurate appraisal of competence as a prospective teacher through formal evaluation tools
- Writing a letter of recommendation/summary of practice upon completion of the clinical experience

Collaboration and Professional Development

- Attending informational sessions and professional development workshops throughout the term held at the University of Dayton and/or in the schools
- Planning, participating, and implementing professional development experiences, such as informal seminars with interns, building-wide teaching seminars, self-studies with liaison, etc
- Determining the final grade for the intern in conjunction with the liaison

Expectations of the Liaison

The liaison assumes these responsibilities for supervising the activities of the intern:

Orientation

- Providing an orientation explaining site specific and scheduling expectations of respective programs

Instructional Support

- Supporting the growth of the intern with knowledge of effective teaching methodologies, developmental supervision, research based best practices, and content area expertise

Assessment and Evaluation

- Recording observations using the Ohio Standards for the Teaching Profession based observation form is expected during each visit. The liaison will observe the intern five times spaced at regular intervals. Written feedback is provided to the intern in the post-observation interviews
- Collaborating and conferencing with the clinical educator and intern in order to document, inform, and monitor the intern throughout the clinical experience using written feedback or intervention plan if needed
- Collecting and forwarding assessment forms to the University of Dayton's Educational Field Office at the end of the term – including evidence of multiple observations, the Mid-Term and Final Assessments, Clinical Educator Letter of Recommendation/Summary of Practice and Liaison Letter of Recommendation/Summary of Practice
- Writing a letter of recommendation/summary of practice for the intern at the end of the placement

Collaboration and Professional Development

- Promoting a thorough understanding of clinical experience through seminars and/or meetings with principals, clinical educators, and interns
- Visiting schools regularly to consult/collaborate with clinical educators while mentoring and documenting the growth of the interns
- Collaborating and conferring with clinical educator to determine the final grade for clinical experience
- Facilitating professional development seminars in collaboration with the clinical educators and/or building faculty for interns and/or clinical-educators. Some seminars may include: professional conversations (based on observations, strategies, etc.), classroom management, differentiated instruction, book study, scripting, grant writing, action research, and/or other topics of interest
- Safeguarding the interns from being assigned the role of substitute teacher. In the event of the absence of the clinical educator, a substitute teacher must be in the classroom, even though the intern may teach all or part of the day

Expectations of the Principal

The principal is responsible for:

Collaboration and Professional Development

- Safeguarding the interns from being assigned the role of substitute teacher. In the event of the absence of the clinical educator, a substitute teacher must be in the classroom, even though the intern may teach all or part of the day
- Safeguarding the intern from involvement in teacher strikes. The University will remove interns from the school in the event of a strike
- Assisting with problem situations upon request of the liaison, clinical educator, or intern

Intern Evaluation

Grading System

During the experience, the clinical educator and liaison will convey to the intern a grade indicative of his/her academic standing to date. The clinical educator, in collaboration with the liaison, will be responsible for the final grade as it relates to the Ohio Standards criteria and/or the programmatic, licensure standards.

The evaluation of the work of the intern is a collective effort involving the intern, the clinical educator, the liaison, and at times, the building principal. Self-reflection continually conducted by the intern is one of the most important elements of evaluation. During the experience, the clinical educator and liaison will convey to the intern a grade indicative of his/her academic standing to date. It is expected that frequent conferences between the clinical educator and the liaison will result in reasonable agreement concerning the academic grade. The clinical educator and liaison will be responsible for the final grade.

Undergraduate letter grade will be determined in accordance with definitions in the following paragraphs. A, A-, B+, B, B-, C+, C, C-, D, and F are grade options as well.

The post baccalaureate letter grade scale: A, A-, B+, B, B-, C, and F.

- A – This intern possesses personal and professional qualities associated with outstanding beginning teaching; knowledge of subject matter is characterized by both breadth and depth; acquaintance with pedagogical strategies and techniques are evident.
- B – This intern has a reasonable command of subject matter and teaching techniques and possesses the personal qualities associated with acceptable performance as a beginning teacher, but still evidences need for growth in his/her command of subject matter or use of instructional techniques.
- C – This intern’s knowledge of subject matter and/or teaching techniques is significantly weak in some specific way.
- D – This intern is able to finish the assignment, but has a major subject matter or pedagogical weakness. (The grade of D is not used for graduate students.) This intern will not be recommended for licensure.
- F – This intern’s performance is inadequate and/or unprofessional. This intern will not be recommended for licensure.

Other Related Information

Ohio Standards for the Teaching Profession Evaluation Forms and Mentoring

Clinical educators are to use the Candidate Preservice Assessment of Student Teaching Tool (CPAST) for OSTP framework observation/assessment form supplied by the Educational Field Office. Forms are available from the liaison or the university's Educational Field Office website.

http://www.udayton.edu/education/ed_field_office/index.php

Ohio Assessment for Educators

Interns in the different programs are expected to pass two to three Ohio Assessment for Educators exams depending on their licensure and concentration. All interns for Ohio licensure take a Professional Knowledge Assessment test, which is an exam on professional knowledge in the licensure area. Interns then take specialty test(s) depending on their area of licensure.

Further information available at:

<http://education.ohio.gov/getattachment/Topics/Teaching/Educator-Licensure/Prepare-for-Certificate-License/Educator-Licensure-Examinations/July1-14webchart.pdf.aspx>

Applying for a Teaching License

All interns leading to Ohio Licensure must verify they are in "good moral character" and interns must be fingerprinted for background check purposes. Electronic fingerprinting is available in the Office of Public Safety.

The submission and approval for first-time license applications must be completed online. Each applicant for licensure will need a Safe Access for Educators (SAFE) account with the Ohio Department of Education found in the Ohio Department of Education website. Each applicant must create a SAFE account. Once the SAFE account is validated, you may submit an application for an initial license. The system accepts payment by credit card. The SAFE account must be completed before the clinical experience begins.

Requirements for the various types and grade of licensure are described in the bulletin published by the Ohio State Department of Education entitled "Laws and Regulations Governing Licensure." This bulletin may be examined in the School of Education and Health Sciences Dean's office. Information concerning out-of-state requirements for licensure may be obtained from the applicable state education department or board of education websites.

Applying for a Teaching Position

The University of Dayton's Career Services, <http://careers.udayton.edu>, offers the *Hire a Flyer Network* to assist undergraduates and graduate interns in securing employment.

School of Education and Health Sciences

Policies and Procedures Governing Relocation or Removal from Clinical Experience

The faculty at the University of Dayton and our clinical educators in our school partnership sites are committed to the success of every teacher licensure candidate. We work closely with every candidate to ensure a positive experience in the P-12 school that supports the goals of the candidate's specific program. However, circumstances may arise in which an intern may be removed from the school setting and, possibly, the clinical experience.

Candidate-Initiated Removal

If a teacher candidate chooses to withdraw from the internship for medical reasons or other acceptable major causes, the candidate must notify their university liaison and/or the Educational Field Office. The Coordinator of the Educational Field Office will cancel the school assignment with school district officials. Withdrawal policies as stated in the Undergraduate and/or Graduate Catalogs will apply. Candidates are ultimately responsible for ensuring that the appropriate paperwork has been filed and approved for withdrawal from the coursework.

Relocation

In cases of extenuating circumstances in which there is a logistical problem or supervision issue within the original setting (e.g., clinical educator becomes unable to continue, there is a traumatic event influencing the setting), a candidate may be relocated under another placement. Such a change requires approval of the Program Coordinator who notifies the Educational Field Office Coordinator.

School and/or University of Dayton Initiated Removal from Final Clinical Experience

If a review of a candidate's performance in the clinical experience reveals that he/she is not making satisfactory progress toward meeting program goals, a formal Intervention Plan will be written that describes:

- The area of concern
- Goals to be accomplished by specified dates;
- Actions necessary to meet stated goals
- Criteria to determine success; and
- Support that will be provided by the Liaison, Clinical Educator, and/or others to assist in meeting stated goals, evaluate progress, and provide feedback on progress

The Intervention Plan will be written by clinical educator and university liaison and must be shared with the Educational Field Office. Suggestions and deadlines for improvement are made in writing and signed by all parties. The individuals responsible for the implementation will meet with the licensure candidate to support the candidate's understanding and implementation of stated goals through a formal monitoring of progress. If the candidate does not meet the requirements of the Intervention Plan by the specified dates, he/she, at the discretion of the appropriate personnel, can be removed from the clinical placement. The clinical educator and the liaison will provide detailed documentation of the reason(s) for recommendation of removal. Copies of the written documented evidence will be provided to the Licensure Program Coordinator and the Educational Field Office Coordinator. Based on the information presented, the candidate's success in meeting the identified goals for improvement will be assessed. At that time, the Licensure Program Coordinator will make a recommendation for either:

- Relocation of the student and continuation of the clinical experience; or
- Withdrawal from the clinical course without relocation; Program Coordinator determines replacement coursework for degree completion

A candidate who does not report to his/her assigned school setting or does not respond to contact from appropriate school and/or university personnel can be immediately removed from the placement without requirement of a formal Intervention Plan. A decision to not to relocate a candidate in a subsequent school placement can be appealed to the Chair of Teacher Education.

Emergency Removal

A teacher candidate may be removed from the school site for violations of professional conduct and/or when there is reasonable cause to believe that the candidate is an immediate threat to the safety, health, or welfare of himself or herself, P-12 students, other UD candidates, and/or school – or university-based personnel and/or when the candidate’s continued presence may be disruptive to the community or to the mission of the school or the university’s teacher education program. Alleged infractions will be brought to the immediate attention of the Coordinator of the Educational Field Office or university faculty/liaisons, who will submit a written report of the allegations no later than three working days following the initial contact with university personnel.

I have read and understand the preceding statement concerning the policies and procedures governing relocation and removal from the clinical experience.

Teacher Licensure

Candidate Signature _____ Date _____

Please Note:

To request academic accommodations due to a disability; please contact the Office for Students with Disabilities, 002 Albert Emanuel Hall, (937) 229-3684. If you have a self-identification form from the Office of Students with Disabilities indicating that you have a disability, which requires accommodation, please present it to the university faculty so we can discuss the accommodation you might need in class.

The University of Dayton does not discriminate on the basis of age, race, color, creed, national or ethnic origin, or sex, not against otherwise qualified handicapped students in its admissions policy and academic standards, nor in the granting of scholarships, loans, and other financial aid, nor in the planning and administration of its academic, athletic, and other programs, services and activities.

The placement of a clinical experience intern is a serious commitment for the intern, the clinical educator and the university. If for any reason the intern chooses not to honor and/or complete his/her commitment in the original academic term, but would like to complete it in the future, the following guidelines will be followed:

- *The intern must **resubmit** his/her clinical experience application in order to be considered for a new placement.*
- *The intern must submit a letter **detailing an action plan** explaining the steps needed to complete, in order to ensure his/her success.*

*Each application will be considered on a case-by-case basis by an EDT faculty committee. **Any student intern that self-selects out of their initial placement is not guaranteed that his/her new application will be accepted, or that a placement will be possible.***

Clinical Roles and Required Best Practices for the University of Dayton's Teacher Education Program

Purpose: This chart provides rationale for the work as outlined in the Clinical Experience Handbook

Frequency of Contact	Required Documentation	Observation of Teaching
<p>Clinical educators Provide daily modeling and mentoring to the candidate</p> <p>Maintain ongoing communication with University Liaison</p> <p>Three-way Conference at midterm and final</p>	<p>Clinical educator, candidate, and university liaison complete the following forms:</p> <ul style="list-style-type: none"> - CCAST Pedagogical midterm form - CCAST Dispositions midterm form - Additional program-specific forms - CCAST Pedagogical summative form - CCAST Disposition summative form 	<p>Clinical educator will informally observe and discuss progress with the candidate on an ongoing basis with formative feedback.</p> <p>Clinical educator completes a minimum of three (3) formal observations with written feedback.</p>
<p>University liaison Maintains ongoing communication with candidate and clinical educator on weekly basis</p> <p>University liaison completes weekly contact log</p>	<p>University liaison documents all observations of the Ohio Standards for the Teaching Profession and additional program specific forms.</p> <p>Clinical educator, candidate, and university liaison complete the following forms: University liaison records consensus data on:</p> <ul style="list-style-type: none"> - CCAST Pedagogical midterm form - CCAST Dispositions midterm form - Additional program-specific forms - CCAST Pedagogical summative form - CCAST Disposition summative form 	<p>University liaison will informally observe and discuss progress with the candidate with feedback.</p> <p>University liaison completes a minimum of two (2) formal observations with written feedback.</p>
<p>Clinical Educator and University Liaison provide Letters of Recommendation</p>	<p>Clinical Educator and Liaison each write letters of recommendation and summary of practice Letters are submitted to Educational Field Office for archival as narrative documentation of the clinical experience.</p>	<p>Each written evaluation summary provides evidence of practice with a common understanding of the candidate's current practice and areas of future continued growth.</p>
<p>Clinical Educator and University Liaison Final Evaluation</p>	<p>Intern evaluation conveyed through UD grading system.</p>	<p>Clinical Educator and Liaison collaborate on final evaluation through observations and evidence of practice.</p>