

INTERN EVALUATION RECORD

School Year _____

Educator/Intern _____

Grade/Subject _____

SSN _____

School _____

Primary Evaluator _____

Secondary Evaluator _____

Please Check

CURRENT LICENSE STATUS

Interim D (Apprentice)

Mentoring Teacher/Teachers Assigned to Intern

OBSERVATION RECORD/DATES:

Obs. ____ Post or Reflect/Appraisal _____

Observer _____

Obs. ____ Post or Reflect/Appraisal _____

Observer _____

Obs. ____ Post or Reflect/Appraisal _____

Observer _____

PROFESSIONAL SUMMARY

Areas of Strength (identify by domain and indicator with explanation):

Areas to Strengthen/Grow (identify by domain and indicator with explanation):

Educator/Intern Signature

Primary Evaluator Signature

Secondary Evaluator Signature

Date

RECOMMENDATION

Licensure

- Recommended for Apprentice License
- Not recommended for Apprentice License
(copies of all forms must be sent to UTK
Licensure Office and School System of
Placement)

- General Education
- Comprehensive Assessment
- Special Groups
- Library Media

White Copy - UTK Licensure Office
Canary Copy - School System of Placement
Pink Copy - Educator/Intern
Photo Copy - Secondary Evaluator