



Mount Saint Vincent University
UNIVERSITY SUPERVISOR ASSESSMENT



FORMATIVE
SUMMATIVE

Please return to: Mount Saint Vincent University, Faculty of Education, 166 Bedford Highway, Halifax, NS, B3M 2J6 or email education@msvu.ca or fax (902) 457-4911

Student Teacher:			Year 1		Year 2	
Program:	Elementary		Secondary			
University Supervisor:						
Cooperating Teacher:						
School:						
Observation Dates:						
Grade/Subject:				Date of report:		

This assessment is to include conversation and consultation with the Student Teacher and whenever possible with the Cooperating Teacher. Please use the Cooperating Teacher report and or Descriptors For Formative and Summative Assessment found in the Guidebook to provide guidance to complete the formative and summative assessment of the Student Teacher’s practice.

Please provide a brief context for the student teaching setting:

Professional Behaviour
Summary Comments:

Planning and Preparation
Summary Comments:

Teaching Practice

Summary Comments:

The Learning Environment

Summary Comments:

Additional Comments:

Assessment to Date

Satisfactory

With Reservation

(For Year 1 and Year 2 formative only)

Unsatisfactory

Submitted by University Supervisor: _____

Student Teacher signature: _____

This is to confirm that I have read and discussed this report.

REPORTS SENT ELECTRONICALLY ARE CONSIDERED AN ACCEPTABLE ALTERNATE TO ONE WITH A HANDWRITTEN SIGNATURE.

This has been sent as an electronic copy