

DEPARTMENT OF SECONDARY AND SPECIAL EDUCATION - XAVIER UNIVERSITY

DISPOSITION PROGRESS REPORT FORM

COURSE NAME/NUMBER _____ SEMESTER _____

Candidates Name (please print) _____

Signature of Candidate * _____ Date _____

Faculty/Instructor (please print) _____

Signature of Faculty/Instructor _____ Date _____

COURSE COMPONENT

Please check the appropriate rating for each category using the following scale. Be sure to document a score of 2 or 1 by providing evidence in the comment column. Use back portion for additional comments.

3 = Meets expectations

2 = Some inconsistency

1 = Unacceptable**

	3	2	1	Comment
Candidate attends all classes and is punctual.				
Candidate actively participates in class discussions and activities.				
Candidate demonstrates respect for the learning community and alternative viewpoints.				
Candidate takes responsibility for his/her academic development.				
Candidate demonstrates ethical practices.				

FIELD COMPONENT** (Only completed by Field Placement Coordinator if concern is reported by a cooperating teacher and/or supervisor.)

Professionalism: _____

* Only required if a rating of 2 or 1 is given.

**A rating of "not acceptable" or a comment by the Field Placement Coordinator requires that a plan for improvement be developed by the student and accepted by the Program Director and Chair of the Department of Secondary and Special Education.