

*EDUCATION*

Teacher Certification Program

**Formal Procedure** - Referral to Elected Faculty Council

**Formal Professional Support Plan**

**Purpose:**

Professional Support Plans (formal and informal) are meant to help students name, plan, and grow in specific areas of TCP Dispositions and/or equitable teaching practices. On an interpersonal level, this process is restorative for relationships; on a professional level, this process supports students to work toward SOE and WA state requirements for teacher certification. This process may call attention to one or more [Standards for Essential Skills and Dispositions,](https://docs.google.com/document/d/1FmAOcxljHj7U1QpqU5UFTnO3eeZyK5FCDSnKFUPmfyg/edit?usp=sharing) and the process itself embodies one specific element of the **Self-Awareness** disposition:

“***Accept and integrate feedback to improve practice*** in university and K-12 settings from faculty, staff, field supervisors, mentor teachers, administrators and other professionals.”

|  |  |
| --- | --- |
| Student/Candidate Name: |  |
| Date of Referral: |  |
| UW Tacoma Roles & Names: |  |
| (if included) Field Placement Roles & Names: |  |
| Elected Faculty Representative |  |
| Elected Faculty Representative |  |

**1) Focus of concern(s)** *(to be completed by field supervisor/advisor/faculty)***:**

* Describe the **area(s) of concern** in which the intern is experiencing difficulties.
* Describe the **impact(s)** that the concern(s) are having on the student and/or other people.

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| --- | --- |
| **Area of Concern:** | **Impact(s):** |

(Add rows for additional areas as needed.)

**First Warning:** I**nitial Intervention:**

**2) Goal(s) for** **Improvement >****> Key Steps toward Goals:**

* Describe the **specific goal(s)** for the student to work toward.
* For each goal, describe **a few key steps** that will move the student toward the goal.
* Include any **supports (people or resources)** recommended for the student.

|  |  |
| --- | --- |
| **Goal 1:** | **Key Steps & Supports for this Goal:** |

(Add rows for additional goals as needed.)

**3)** **Activities >****> Expected Observable Progress toward Goals:**

 For each goal...

* Describe specific **activities** recommended for moving toward the goal.
* Describe **observable progress** that is expected from the activities.
* Include any supports (people or resources) needed for the student.

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| **Goal 1:****Activities & Supports:** | **Expected Observable Progress:** |

(Add rows for additional goals + activities as needed.)

**4)** **Timeline >****> Observable Assessment of Progress:**

* Provide a timeline of **Goals & Key Steps**.
* Leave space to describe **observable progress** toward each goal.

|  |  |  |
| --- | --- | --- |
| **Target Date:** | **Goal 1 & Key Step(s) to complete by this date:** | **Observable Assessment of Progress toward this Goal:** |

(Add rows for additional goals as needed.)

**5) Assessment of Progress:**

* Describe (**assess**) the student’s progress toward the Goals.
* Describe the **impact(s)** of this progress on the student and/or other people.
* Describe any **lingering concern(s)** for the student.

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| --- | --- |
| **Goal 1:** | **Assessment & Impact(s):****Lingering concern(s):** |

(Add rows for additional goals as needed.)

Date for Review:

|  |  |
| --- | --- |
| * Progress satisfactory
 | * Progress not satisfactory
 |

Elected Faculty Council Representatives

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| *Name* | *Signature* |
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| *Name* | *Signature* |

Advisor/Faculty Representative

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| *Name* | *Signature* |

Student/Candidate

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| *Name* | *Signature* |
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**Second Warning: Initial Intervention**

[ See first page for **1) Focus of concern(s****)** ]

**2) Goal(s) for** **Improvement >****> Key Steps toward Goals:**

* Describe the **specific goal(s)** for the student to work toward.
* For each goal, describe **a few key steps** that will move the student toward the goal.
* Include any **supports (people or resources)** recommended for the student.

|  |  |
| --- | --- |
| **Goal 1:** | **Key Steps & Supports for this Goal:** |

(Add rows for additional goals as needed.)

**3)** **Activities >****> Expected Observable Progress toward Goals:**

 For each goal...

* Describe specific **activities** recommended for moving toward the goal.
* Describe **observable progress** that is expected from the activities.
* Include any supports (people or resources) needed for the student.

|  |  |
| --- | --- |
| **Goal 1:****Activities & Supports:** | **Expected Observable Progress:** |

(Add rows for additional goals + activities as needed.)

**4)** **Timeline >****> Observable Assessment of Progress:**

* Provide a timeline of **Goals & Key Steps**.
* Leave space to describe **observable progress** toward each goal.

|  |  |  |
| --- | --- | --- |
| **Target Date:** | **Goal 1 & Key Step(s) to complete by this date:** | **Observable Assessment of Progress toward this Goal:** |

(Add rows for additional goals as needed.)

**5) Assessment of Progress:**

* Describe (**assess**) the student’s progress toward the Goals.
* Describe the **impact(s)** of this progress on the student and/or other people.
* Describe any **lingering concern(s)** for the student.

|  |  |
| --- | --- |
| **Goal 1:** | **Assessment & Impact(s):****Lingering concern(s):** |

(Add rows for additional goals as needed.)

Date for Review:

|  |  |
| --- | --- |
| * Progress satisfactory
 | * Progress not satisfactory
 |

Elected Faculty Council Representatives

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Advisor/Faculty Representative

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Student/Candidate

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| *Name* | *Signature* |

Final Status:

Date: