

**COLLEGE OF EDUCATION  
FOUNDATIONAL COMPETENCIES EVALUATION FORM**

Candidate Name: \_\_\_\_\_

Program Area: \_\_\_\_\_

**Rate the candidate on each of the standards listed below:**

**KEY:**    *A – Frequently*    *B – Sometimes*    *C – Rarely Ever*    *N/A – Not Applicable/  
Insufficient Opportunity to Observe*

A	B	C	N/A	
				<b>English Language Competence:</b> <i>Ability to express oneself in standard written and oral English</i>
				communicates effectively in standard written and oral English in order to communicate concepts, assignments, evaluations, and expectations with members of the learning community such as University faculty, students, parents, administrators, and other staff;
				<b>Interpersonal Competence:</b> <i>Ability to interact effectively with others</i>
				demonstrates communication skills that are responsive to and respectful of different perspectives represented in diverse classrooms and/or other professional environments;
				demonstrates the necessary interpersonal competencies to function effectively with students and parents, and to function collaboratively as part of a professional team;
				<b>Work and Task Management:</b> <i>Ability to organize and manage multiple work demands</i>
				demonstrates the ability to work under time constraints, concentrate in distracting situations, make subjective judgments, and ensure safety in emergencies;
				demonstrates the ability to organize time and materials, to prioritize tasks, to perform several tasks at once, and to adapt to changing situations;
				<b>Analytic/Reasoning Competencies:</b> <i>Ability to think analytically and reason logically about professional topics, issues, and problems</i>
				demonstrates the ability to understand and extend complex information presented in courses and in their work in professional settings;
				demonstrates the ability to analyze, synthesize, integrate concepts, and problem-solve in the ways he/she understands; and, responds to events and problems in professional contexts, formulates and uses educational assessments, and makes professional judgments;
				<b>Professional Conduct:</b> <i>Ability to work within a set of reasonable expectations for conduct as defined by the profession and/or workplace</i>
<b>A</b>	<b>B</b>	<b>C</b>	<b>N/A</b>	

				arrives on time for professional commitments, including classes and field experiences;
				seeks assistance and follows supervision in a timely manner, and accepts and responds appropriately to constructive review of his/her work from supervisors;
				demonstrates attitudes of integrity, responsibility, and tolerance;
				shows respect for self and others;
				projects an image of professionalism;
				<b>Physical Abilities:</b> <i>Ability to meet the professional demands of the profession and/or workplace</i>
				demonstrates the physical stamina to work a contractual day and performs extended and additional duties of a school professional such as parent conferences, after-school events, and other assigned duties;
				<b>Professional Dispositions:</b> <i>Demonstrate the belief that all children and adults can learn; commitment to own continuing professional development; assumption that they can be responsible agents for the improvement and reform of education</i>
				demonstrates in the full range of professional activities that (s)he understands that all children and adults can learn, irrespective of racial, social, cultural, linguistic, mental and physical ability differences;
				understands and accepts the responsibility to contribute constructively to efforts to improve the nature and quality of educational experiences for children, youth, and adults, especially in urban and multicultural contexts;
				accepts that learning to be a professional is an ongoing process and applies his/her analytic and reasoning abilities in reflecting on own work and on the work of others; uses reflection as a foundation for setting reasonable and appropriate goals for professional development.

Recommendation for program continuance: \_\_\_\_ yes \_\_\_\_ no \_\_\_\_ probationary

Recommendation for program completion and certification: \_\_\_\_ yes \_\_\_\_ no \_\_\_\_ N.A.

Additional Comments:

\_\_\_\_\_  
Name/Title

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Signature/Date

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