

## Middle School and Diversity Practicum Student Eval Form

<b>Practicum Student's Name:</b>	Terra Larson
<b>Date:</b>	2016-12-15
<b>Practicum Student's Email Address:</b>	tnlarson1@umary.edu
<b>Practicum Course:</b>	EDU 305 - Middle School Practicum
<b>Name of Classroom Teacher or University Supervisor completing this evalutaion:</b>	Kim Chaussee
<b>Evaluator's Email Address:</b>	kimberly_chaussee@bismarckschools.org
<b>Practicum School / Site:</b>	Horizon Middle School
<b>EVALUATION:</b>	All of the Time
<b>EVALUATION:</b>	All of the Time
<b>EVALUATION:</b>	All the Time
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<b>EVALUATION:</b>	All of the Time
<b>EVALUATION:</b>	All of the Time
<b>EVALUATION:</b>	All of the Time
<b>EVALUATION:</b>	All of the Time
<b>EVALUATION:</b>	No Opportunity to observe
<b>EVALUATION:</b>	All of the Time
<b>Do you have any concerns regarding this practicum student's professional skills? If yes, please list your comments below.</b>	No
<b>General Comments:</b>	Best Wishes, Terra! You're going to make a great teacher. I enjoyed sharing my classroom with you and thank you for all of your help!