

|  |  |
| --- | --- |
| Academic year: | Date: |

**INTERNSHIP EVALUATION FORM**

**OPINION OF THE ENGLISH TEACHER – SUPERVISOR OF**

**THE CONTINUOUS DIDACTIC INTERNSHIP** **I**

|  |
| --- |
|  |
| 1. Student’s full name: |
| 2. Faculty, study programme, year and semester: **Faculty of Philology, University of Opole, Poland** **English Philology - Teacher Training Programme**Year: 1 semester: 2  |
| 3. Internship dates: from ……………………. to ……………………. |
| 4. School/institution: |
| 5. Teacher-supervisor’s full name: |
| 6. Teacher-supervisor’s years of teaching experience, degree (optional): |
| 7. Internship organization, including hourly statement of the student’s duties: |
| **Statement of student’s duties** |
| Duties | Number of hours |
| a) Number of hours spent in direct contact with the teacher-supervisor |  |
| b) Lesson observations |  |
| c) Hours of teaching |  |
| d) Preparing didactic tools/projects/lesson plans |  |
| e) Acquainting with school/institution and its documentation |  |
| f) Other tasks and duties done by the intern |  |
| **Total:** | **30 hours** |
| DETAILED OPINION ABOUT THE INTERN AND THEIR PREPARATION FOR THE TEACHING PROFESSIONThe opinion should cover all phases of the teaching internship. It may also include the assessment of: student’s theoretical and methodological knowledge, skills needed for the teaching profession, personal predispositions, self-discipline, sense of duty, level of creativity, pedagogical tact and good manners, the ability of self-assessment and making a good use of the supervisor’s advice, the ability of organizing and planning educational-didactic work and/or tutoring, the ability to build relation with children/pupils, the ability to work in a team, to communicate politely, and other.The opinion should be prepared for each student individually.VERTE |
| **OPINION** |
|  |
| GRADE (expressed in a grade: excellent/5,0; very good/4,5; good/4,0; satisfactory /3,5; sufficient /3,0; failed/2,0)  |
| **The opinion was prepared in two copies.** |

 (Place) (Signature of the teacher-supervisor)

(School/institution stamp)

\* *For internal use ONLY*

Comments regarding passing of the continuous didactic internship I

(signature of the Internship coordinator for continuous didactic internship I)