**Support Supervision Notes**

(Planning Notes)

Teacher Candidate:       School:

Support Supervisor:       Grade/Subject:

Date/Time:       Period:       Type of Visit: [ ]  Planning [ ]  Demo Lesson [ ]  Co-Plan/Co-Teach Contact Administrator: [ ]  Yes [ ]  No

|  |
| --- |
| **CA Universal Teaching Performance Expectations** |
| ***TPE 1*** ***Engaging and Supporting All Students in Learning*** | ***TPE 2*** ***Creating and Maintaining Effective Environments for Student Learning*** | ***TPE 3*** ***Understanding and Organizing Subject Matter for Student Learning*** | ***TPE 4*** ***Planning Instruction and Designing Learning Experiences for All Students*** | ***TPE 5*** ***Assessing Student Learning*** | ***TPE 6*** ***Developing as a Professional Educator*** |
| [ ]  1.1 [ ]  1.2[ ]  1.3[ ]  1.4[ ]  1.5[ ]  1.6[ ]  1.7[ ]  1.8 | [ ]  ***2.1***\* [ ]  2.2[ ]  ***2.3\****[ ]  2.4[ ]  2.5[ ]  2.6 | [ ]  3.1 [ ]  3.2[ ]  3.3[ ]  3.4[ ]  3.5[ ]  3.6[ ]  ***3.7\****[ ]  3.8 | [ ]  4.1 [ ]  4.2[ ]  4.3[ ]  4.4[ ]  4.5[ ]  4.6[ ]  4.7[ ]  4.8 | [ ]  5.1 [ ]  5.2[ ]  5.3[ ]  ***5.4\****[ ]  ***5.5\****[ ]  5.6[ ]  5.7[ ]  5.8 | [ ]  6.1 [ ]  6.2[ ]  6.3[ ]  ***6.4\****[ ]  6.5[ ]  ***6.6\****[ ]  6.7 |
| ***\* Denotes TPEs that are only observed in clinical fieldwork.*** |

|  |
| --- |
| **Notes:**  |
| **TPE/CSTP:** | **Commendation(s) tied to TPE/CSTP:** | **TPE/CSTP:** | **Recommendation(s) tied to TPE/CSTP:** |
|       |       |       |       |
|       |       |       |       |

Visit Number:       Date of the next visit:

Teacher Candidate’s Signature:

Support Supervisor’s Signature: