

Mentor Teacher Training: A Hybrid Model to Promote Partnering in Candidate Development

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Abstract

In order to promote high quality clinical experiences for teacher candidates, one of the recent changes to educator preparation accreditation standards specifically targeted clinical faculty qualifications. Qualified mentor teachers are critical clinical faculty because they serve as the model for training practices for teacher candidates, the tangible link between research and practice. For optimal training outcomes, educator preparation programs must ensure mentor teachers are skilled in both mentoring teacher candidates and in modeling practices central to candidate preparation. This article describes a hybrid mentor teacher training designed to promote mentor teacher awareness of training program requirements and mentoring responsibilities as well as proficiency in evidence-based practices. Resources, online tools, and collaborative partnerships to support implementation by rural training programs are discussed. Mentor teacher evaluation of the pilot program is reported. Considerations are shared for establishment of P-12 partnerships in clinical faculty preparation and development of sustainable training models.

Keywords: mentor teacher, special education, teacher education, rural, hybrid

Quality clinical experiences that involve effective mentoring by capable professionals are critical to the development of highly skilled and knowledgeable teacher candidates (Leko, Brownell, Sindelar, & Murphy, 2012; National Council for Accreditation of Teacher Education [NCATE], 2010). Research indicates that pre-service teachers who receive high quality mentoring to support application and evaluation of practice improve their quality of instruction (Leko & Brownell, 2011; Parker-Katz & Hughes, 2008). While teacher candidate knowledge of content and evidence-based practices holds enormous potential for impacting the achievement of students with disabilities, the component that enables full impact on teacher development is application in clinical experiences. The opportunity to receive mentoring while applying strategies, reflecting on outcomes, and revising practices is a critical factor in the ability of teacher candidates to mesh content knowledge and pedagogical skills for effective instruction (Klingner, Ahwee, Pilonieta, & Menendez, 2003).

Further, when pre-service teachers struggle translating content and strategies into practice, congruence between clinical settings and course instruction can support skill development (Clift & Brady, 2005). Dooley (1998) documented that, when pre-service teachers encounter practices in clinical experiences that conflict with methods in university coursework, they struggle reconciling the different perspectives, which negatively impacts development of effective practice. Therefore, it is imperative that mentor teachers are aware of evidence-based practices teacher candidates are learning to ensure the continuity in information across settings for candidate success (Jenkins & Fortnam, 2010).

In a 2010 report, the National Council for Accreditation of Teacher Education (NCATE) endorsed this accountability of mentor teachers by articulating their responsibility for modeling highly effective practices and for guiding the development of teacher candidate practice. This NCATE report is seminal in its provision of a blueprint for using clinical practice as the catalyst for transforming teacher education. The development of a highly skilled clinical faculty that includes mentor teachers, clinical supervisors, and university faculty immersed in P-12 settings is a key component of this transformation. High quality clinical experiences are made possible through effective partnerships between teacher preparation programs and P-12 systems and schools. Dependent on the structure of the training program, roles and responsibilities of clinical faculty can vary, but all emphasize the immersion of P-12 faculty in the teacher preparation programs and the teacher preparation faculty in the P-12 setting. These clinical expectations outlined by NCATE serve as the foundation for new teacher education accreditation expectations for clinical practice (Council for the Accreditation of Educator Preparation [CAEP], 2013). Moving forward, all accredited teacher education programs will be expected to restructure programs to provide clinical experiences with highly qualified clinical faculty.

While terminology may vary for clinical faculty roles, for the purposes of this paper, mentor teacher will refer to the P-12 teacher mentoring a teacher candidate in a clinical placement. There are broad sets of specific practices and skills employed by mentors to impact pre-service teacher development. These include (a) modeling of effective practices;

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(b) providing guidance with advance planning; (c) engaging in constructive feedback, including promoting reflection on ongoing teacher learning and practice development; and (d) sharing resources (Butler & Cuenca, 2012; Giebelhaus & Bowman, 2002; Sayeski & Paulsen, 2012); however, mentor teachers often are placed in the mentoring role without preparation, and, while mentors readily engage trainees in classroom practice, they are uncertain of their other responsibilities, particularly as they relate to mentoring and feedback (Morehead & Waters, 1987). Mentor teachers are most effective and comfortable in fulfilling the role of mentor when provided guidance as to expectations of the role and training to support fulfillment of responsibilities.

Ensuring preparation programs have an adequate supply of well-prepared mentor teachers to support the number and needs of teacher candidates in training is challenging but can be increasingly so in rural areas. Securing qualified mentor teachers is particularly difficult in rural areas with underperforming schools, high rates of poverty, and high minority populations, such as rural middle Georgia (Governor's Office of Student Achievement, 2013). Schools with these characteristics typically face the greatest struggle in hiring and retaining qualified teachers (Keigher, 2010), which presents challenges for school as well as teacher education improvement. Not only are educator preparation program resources stretched across a broad geographic area due to lower rural population density, they also encounter issues with teacher turnover and quality as they seek the most qualified mentor teachers for teacher candidate preparation. Development of a systematic approach for training mentor teachers is imperative so that candidates receive experiences and training that prepare them to meet the challenges they eventually will face as teachers in these high needs rural school systems.

Project Description

This article describes a hybrid mentor teacher-training program designed for P-12 personnel mentoring undergraduate initial certification teacher candidates. The training was implemented by a project at Georgia College & State University (GC), *Preparing Highly Qualified Special Education Teachers* (Prepare), through funding support from the U.S. Department of Education Office of Special Education (OSEP) Preservice Training Improvement initiative. The mentor teacher training was one component of a multi-component restructure of GC's special education P-12 high incidence initial certification undergraduate program that targeted training enhancement in literacy, math, and evidence-based practices. During the restructure, the program maintained the emphasis on clinical experiences, with over 1,000 hrs of placement across the 2-year program, but increased candidate requirements for field-based application of course content. To promote optimal candidate outcomes, Prepare designed a training program for mentor teachers to facilitate their success as co-partners in candidate preparation by immersing them in mentoring strategies and program content. Program design was developed after conversations with other OSEP projects implementing mentor teacher training to gain insight into varying training goals and components (C. R. Gareis, personal communication, February 11, 2013; K. J. Paulsen, personal communication, February 6, 2013).

The mentor teacher training program was designed to address two specific needs: (a) mentor teacher understanding of program expectations for candidates (e.g., guiding program focus, standards, and assessments), as well as their responsibilities related to mentoring and providing feedback to candidates, and (b) mentor teacher proficiency in evidence-based practices targeted during candidate training. The intended outcomes were a sustainable training program that would ensure effective mentoring of candidates and modeling of best practices in clinical placements. The special education program enrolled an average of 62 candidates per year and maintained partnerships with over 20 schools in four rural counties to meet program placement needs. Given this broad rural service area and the small university size with limited resources, there were unique challenges in developing a sustainable program post-funding. Specific components of the designed program are detailed below.

Training Components

To facilitate sustainability post-funding and to ensure that the mentor teachers from rural areas could participate, the training was designed for hybrid delivery utilizing the online learning platform Brightspace™ created by D2L (formerly Desire2Learn). While a face-to-face component was deemed critical for building open lines of communication between university faculty and mentor teachers, the online component of training was necessary to reduce personnel time, costs associated with implementation, and travel demands for participants. The training included one required face-to-face full day of training, one optional half day for online technical support, and four required online modules. Face-to-face training occurred at the beginning of the local school summer break with the optional technical support occurring the day immediately following. Online modules were available immediately after the required face-to-face training for a period of 3 months for completion. See Table 1 for an overview of training content.

Face-to-face training. The required Day 1 face-to-face session covered the following topics: (a) program standards and field-based assignments, (b) mentoring and mentor assessment of candidates, (c) classroom management, and (d) online system basics.

The initial two topics were foundational to provide mentor's insight into the program vision and the interconnection of candidate field assignments, field evaluations, standards, and accreditation. During the presentation of this information, case studies were embedded to generate discussion and problem-solving steps specific to evaluation of and feedback for candidates from a mentoring standpoint. Participants were provided a binder with resources on this aspect of the training to utilize as a reference in mentoring teacher candidates in their classrooms. Resources included Council for Exceptional Children initial certification standards, the instructions and rubrics for field assignments, and the candidate field evaluation instrument completed by mentor teachers and clinical supervisors.

The third topic, classroom management, was an immersion in evidence-based practices and was a precursor to the subsequent online modules, all of which addressed best practices. Classroom management was presented face-to-face as it

Table 1.*Content of Training Modules*

Delivery	Topic	Content
Day 1: Face-to-Face	Program Standards and Field-based Assignments	CEC and InTASC standards overview; special education program assessments and target standards
	Mentoring and Mentor Assessment of Candidates	Unit field assessment and case study scoring discussions; edTPA requirements; effective mentoring and case study problem solving situations
	Classroom Management	Definition of behavior modification; basic behavioral concepts; evidence-based classroom arrangement
	Online Basics	Group overview of online tools with emphasis on tools utilized in modules
Day 2: Face-to-Face (Optional)	Online Support	One on one support from distance learning staff and special education faculty in using the online platform and working through modules
Self-Paced Modules	Individual Behavior Management	Data collection; functions of behavior; functional behavior assessment; function-based intervention plans
	Co-Teaching and Differentiation	Six approaches to co-teaching with video examples; co-planning; differentiation by content, process, and product; universal design of learning (UDL) use for differentiation
	Response to Intervention (RTI)	Overview of RTI; state RTI manual and guidelines; data collection and data based decision-making with progress monitoring data; case study application
	Evidence-Based Practices (EBPs)	Additional classroom management strategies; vocabulary and comprehension strategies; self-regulated strategy development instruction

Note. CEC = Council for Exceptional Children; InTASC = Interstate Teacher Assessment and Support Consortium.

addressed an area of need in many clinical placements and schools. The topic was presented face-to-face, as the content was ideal for engaging all mentor teachers to see the relevance of evidence-based practices to their classrooms and their role as mentors.

Day 1 closed with a group introduction to online system tools and module navigation. All Day 1 presentation materials were available to participants through the online learning system along with the binder that provided printed information on standards and assessments.

Online training. The online component of training was developed as four online modules targeting (a) individual behavior management, (b) co-teaching and differentiation, (c) response to intervention (RTI), and (d) evidence-based

practices. The purpose of the training on these topics, as well as the classroom management content (face-to-face), was to ensure mentor teachers were well versed in approaches and practices that served to underpin the educator preparation program. The intent was for mentor teachers to model these practices, to understand intent of field-based assignments requiring candidate application of these practices, and to provide guidance to candidates in use of these practices. While topic choice was driven by needs of the special education mentor teachers, consideration was given to content that held potential benefits for future training expansion to reach mentor teachers in general education as well.

In the development of the online modules, materials embedded were varied to promote mentor teacher engagement

and consideration of practice applications. Module resources included commercial and free access videos and PowerPoint slideshows, along with web-based training modules and webinars available through U.S. Department of Education national dissemination centers (e.g., IRIS Center, National Center on Intensive Intervention). The modules were designed intentionally to maximize mentor teacher engagement while minimizing instructor time and contact. Given the limited resources available in our rural area to support this training post-funding, emphasis was on a design that could not only be sustained in subsequent years with minimal instructor time (i.e., costs), but had the potential to be used with increased numbers of mentor teachers in future summer sessions. For these reasons, the online system tools selected for use in modules required minimal instructor support once initial set up was complete. Specific Brightspace™ tools utilized to support this were as follows.

All online training modules employed self-assessments to prompt users to monitor their learning across each module through non-graded questions with hints and feedback. Graded quizzes were another system tool that allowed the mentor teachers to work through the modules at their own pace as well as enabled the university instructors to monitor individual participant progress in module completion. A quiz at the end of each online module was automatically graded and required a minimum score of 80% in order to open the subsequent online module. The participants could retake a quiz, if necessary, and could see the questions they missed on the quiz but not the answers allowing them to review the necessary module content to successfully pass the quiz. Another tool that supported automaticity was Intelligence Agents that allowed setup of parameters for pre-written communication with participants. Specifically, e-mails were sent after each successfully completed quiz or if a participant had not accessed the online system for 14 consecutive days. After completion of all training modules, release conditions were used to prompt teachers through exit paperwork for training, including a link to an exit evaluation and a dropbox for uploading the contact hr documentation for professional learning units (PLUs). Even though the online training was designed to operate with minimal instructor support, participants were provided the email address and a contact number to request support from an instructor, as needed.

Time commitment. The combined training was designed to require approximately 30 contact hrs to complete. Actual contact for the face-to-face day was 6 hrs. The four online modules were designed to require about 6 hrs each to complete. The optional half day of face-to-face online system training was calculated as part of online hrs, as mentor teachers were receiving support as they engaged with online module tasks.

Collaborations

Distance education. The use of Brightspace™ as the management system for presenting the online training modules was made possible through a collaborative partnership with the GC Instructional Distance Education and Advanced Services (IDEAS) office. IDEAS provided support for the instructors throughout training development and implementation. Based on the strategic directions of the university,

IDEAS was tasked with a community outreach initiative, and the mentor teacher training met the objectives of this initiative, given potential impact of training on teachers and local schools. For this reason, IDEAS support and the online system access for the mentor teachers who were not university students was provided at no cost.

One hurdle addressed by IDEAS staff was the enrollment of mentor teachers as non-university students in an online course. At GC, Banner® serves as the student information system that communicates course enrollment to the online learning platform. IDEAS set up the mentor teacher training as an exo-Banner course, manually enrolled students, and provided a login and password for each individual participant. Additional services provided by IDEAS included planning of meetings with the instructors, guidance and training in online tool use, and hands-on training for teachers in the online learning platform during the face-to-face sessions.

Continuing education. The GC Continuing Education office also provided valuable support by managing PLU credit for mentor teachers. Since PLUs can be utilized for teaching certificate renewal in Georgia, 3 PLUs (i.e., 10 contact hrs per PLU) were offered to training completers. The state-required application for PLU approval was submitted through Continuing Education due to the office's established relationship with the Georgia Department of Education as a provider of PLU approved course offerings.

Upon training completion, mentor teacher online quizzes and the contact hr log sheet served as documentation of participant mastery of content as required for PLUs. For a nominal fee, the Continuing Education staff processed and mailed PLU course completion certificates to mentor teachers. Mentor teachers provided the certificates to their school system human resources departments to be included with teaching certificate renewal packets.

Pilot Program Implementation

This mentor teacher training was piloted with the two counties that committed to partnering with Prepare when the grant application was initially submitted. Mentor teachers in these systems were identified from special education undergraduate placements utilized in fall 2013 and spring 2014. In January 2014, letters were sent to the special education directors and school principals in these systems to ensure they were informed of the project and the purpose of the training. The mentor teachers were sent letters inviting them to participate and asking them to RSVP if they planned to attend the training. Of 51 teachers who were sent invitations, 24 responded that they would attend. Two additional reminders with confirmation requests were sent prior to the training with only 11 confirming attendance. Given the reduced confirmations, the decision was made to offer the training to special education adjunct faculty serving in the role of clinical supervisor. The intent was to ensure clinical supervisors and mentor teachers received consistent communication regarding program content, field requirements, and evaluation expectations. Three special education clinical supervisors were invited. The final number of training participants during the pilot was 13, which included 12 mentor teachers and 1 clinical supervisor. As incentives, participants who completed the

training received a \$300 stipend supported by Prepare funding and were eligible for 3 PLUs. Of the 13 participants who participated in the training, 12 completed all of the training requirements.

Training Evaluation

All 12 of the participants who finished the training completed the training evaluation and provided informed consent for project use of the data. The survey consisted of 11 questions with a mix of multiple choice as well as scaled and open response questions. The evaluation served to provide feedback to guide training revision and improvement, including information regarding incentives that would promote future mentor teacher participation for long-term project sustainability.

Concerning overall quality of the training using the levels of poor, fair, good, and excellent, 7 of the 12 respondents rated the training as excellent and 5 rated it as good. Concerning the usefulness of each content area covered during the training, each participant rated all of the content areas covered as either excellent or good, with no content area rated as fair or poor; however, when given choices for how to improve the training, 6 of 12 respondents requested a change in topic content. Respondents elaborated on potential training improvements through open-ended response questions with three themes arising: (a) requests for additional content on mentoring, (b) requests to reduce time or work required (specifically, the IRIS module requirements), and (c) requests to expand training to others (i.e., schools, general education teachers).

When participants were asked to rate the applicability and benefit of the training to their work, 10 of 12 participants ranked it as excellent. To expand on this question, participants were asked what they planned to do differently in their classrooms or when working with teacher candidates as a result of the training. The most prevalent theme was that participants felt better prepared to support candidates. More specifically, they were more confident in supporting candidates by modeling best practices (e.g., "I feel like the topics in the modules helped to refresh my memory about interventions and strategies to use when teaching academics and/or dealing with behaviors.") and/or through understanding field-based assignment requirements and intent (e.g., "I feel like I will be able to give more support and understanding to my student teacher now that I know specifically what they are expected to accomplish each semester."). Another theme identified was that training provided participants with tangible resources to assist them in their mentoring role. Resources of relevance included module materials (e.g., "I plan to share the resources on behavior management strategies because this always seems to be a weakness of student teachers-being able to manage the class setting.") as well as the program standards and assignment binder (e.g., "I will review the notebook before school starts, so I can better help the student teacher."). As these responses indicate, mentor teachers have specific plans for utilizing resources to support teacher candidate preparation.

In order to determine what incentives would motivate future mentor teachers to take part in the training in the future, the participants were asked to rank order a list of six possible incentives (i.e., PLUs, stipend, graduate course credit, hybrid

delivery, face-to-face delivery, and 100% online) from the most motivating to the least motivating. The majority of participants ranked the stipend as the most motivating incentive, with a few ranking PLUs in that position. Participant rank ordering of responses from greatest to least motivating was stipend, PLUs, graduate credit, hybrid delivery format, 100% online, and face-to-face. This information was beneficial as Prepare collaboratively planned with the college administration to sustain and expand training to all teacher preparation programs in the college. While these responses are reflective of participants who selected to participate in training, incentives will need to be evaluated on an ongoing basis to ensure they are attractive to the larger pool of mentor teachers.

Overall, survey responses confirmed that the training content was of good quality and was beneficial to the mentor teachers but that ongoing efforts to improve training are warranted. Most important, these responses indicated that mentor teachers understand that adjusting their practices based on training received has the potential to impact teacher candidate outcomes. This understanding and beginning shift in practice is a step toward ensuring congruence across the university and clinical settings in teacher candidate preparation.

Moving Forward

This mentor teacher-training program targeted a need at GC to ensure mentor teachers were skilled in key practices in candidate training, a need espoused by teacher accreditation agencies (CAEP, 2013; NCATE, 2010). Module development and the pilot training served as an initial step in the long-term process of addressing this need, as well as building an infrastructure for a university and P-12 partnership. Following are insights gleaned from this project to inform ongoing development of mentor teacher training at GC and other institutions.

Partnering

Prior efforts by GC to collaborate and build mentor teacher capacity had not resulted in broad impact or a sustainable model for the college. For this reason, Prepare faculty and staff, who included clinical supervisors, a retired system RTI coordinator, and a former mentor teacher, designed the training considering clinical faculty training needs and established models of mentor training. Given the results of prior efforts, it was necessary to initiate and establish a model that could be utilized to generate buy-in from the college administration and school system partners; however, for lasting change and maximum impact, increased engagement of current school system leaders and mentor teachers is imperative so that a joint vision with goals that serve the needs of all partners can be further developed (Klingner, 2004). This partnering is critical and will ensure mutual benefits: systems will secure teachers trained to address system needs, and universities will secure optimal training grounds.

Moving forward to promote sustained use by mentor teachers of the practices targeted in the training, additional factors should be considered (Klingner, 2004; Klingner et al., 2003). First, school and system administrators must be supportive of the training going beyond approval to endorsement of the practices trained; thus, agreement should be secured as

to training topics that align with best practices in the schools and in the educator preparation program. Second, programs should build in support networks for teacher implementation of trained practices. For instance, pairs or small groups of mentor teachers who work together may be targeted to participate in training so that they can support each other following training. Another option may be to partner clinical supervisors with mentor teachers for modeling practices or for providing feedback. Professional development results in higher rates of implementation when participants are engaged with others and not going it alone (Boudah, Logan, & Greenwood, 2001; Klingner, Vaughn, Hughes, & Arguelles, 1999). As more mentors are trained, communities of practice and model classroom sites could serve to broaden use of target practices in schools. Third, the flexibility and the benefits of the practice must be readily evident. If teachers readily apply the practice in their classroom and can see immediate impacts with student learning or behavior, they are more likely to sustain use. While research of the effectiveness of practices should be shared, modules also might include video of locally trained mentor teachers demonstrating practices or sharing benefits. Finally, training should target practices for which materials are readily available. Practices trained should not generate additional costs for teachers to purchase materials or time demands to make materials, as this will reduce feasibility of use.

Sustainability

This pilot program was developed specifically to be sustainable and to be scaled up for college-wide use with all initial certification programs. The hybrid model reduced potential costs for personnel, materials, and delivery enhancing sustainability and increased the capacity to reach partners across a broad rural area where extended face-to-face training would be time and cost prohibitive. Program components were designed to be readily transferable across other training areas (i.e., elementary, middle, and secondary). For instance, the structure and basic content conveyed related to program standards, assessment, and mentoring is appropriate for use across programs and was designed to allow other faculty to modify with content specific to their training areas. While best practice topic choice was driven by needs of the special education mentor teachers, consideration was given to content that held potential benefits for future training expansion to mentor teachers in other training areas, including special

and general education, and across grade levels. Using an online platform for delivery of these modules allows for flexibility in use by other program areas. For instance, elementary education may choose to utilize all or some of these modules or to develop new modules to address specific training areas they identify as pertinent.

A challenging aspect of sustainability post-funding is continuation of stipends for training completion. As indicated by mentor teachers, stipends serve as an attractive incentive to encourage participation and completion of training. Potential options for preparation programs vary dependent on availability of state, university, or other funding and university system policies. Potential funding sources may include university foundation funds (including private donors specifically supporting the project), university and college budget expansions, and additional student teaching fees. An additional option under consideration by GC is the packaging of modules as statewide online continuing education offerings with generated income designated for mentor teacher training and stipends.

Conclusion

The host teacher-training program developed by Prepare faculty and staff established a foundation for formal training of mentor teachers at GC, addressing the recent teacher preparation accreditation expectations for clinical faculty qualifications. Enhancing the quality of clinical faculty, specifically mentor teachers, is imperative to building a comprehensive approach to teacher preparation that optimizes pre-service clinical experience learning. Teacher preparation programs must recognize that clinical faculty preparation is an ongoing proposition and cannot be accomplished through a one-time training. Clinical preparation requires a partnership between P-12 schools and universities through which structures are jointly developed over time to target teacher preparation improvement. The ultimate goal of this partnering is a mutually beneficial relationship, a professional association of symbiosis, that improves in-service teacher classroom practice, supports pre-service teacher competency, and increases the quality of the new teacher supply for the partner systems. Therefore, it is imperative that teacher preparation programs collaborate with systems to identify P-12 partners and work together to ensure congruence in goals as well as to establish clinical faculty preparation structures to promote sustainability for long-term impact.

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