Initiating Elementary Teacher Candidates: A Structured Design Approach

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Abstract

Teacher education students placed in clinical settings for methods coursework need adequate guidance in order to make the most of their experiences. Guidance in terms of teaching, reflections, clinical settings, and other related activities offers these candidates a realistic view of teacher, teaching, and learning. Oftentimes, the clinical portion of a typical methods course is pass/fail. We discuss the use of a Clinical Connections Notebook to document students’ activities and make them accountable to the cooperating teacher and us in order to determine that pass/fail grade. We share our experiences as we developed and implemented the notebook. We include three key documents we created specifically for the Clinical Connections Notebook and our use of the documents.

Introduction

Undergraduate elementary teacher candidates must make the transition from being students who obtain knowledge through lectures, reading, or hands-on learning to teachers who provide knowledge by means of teaching, mentoring, and coaching (Goodlad, 1994). Faculty members in teacher education programs continue to struggle with how best to assist teacher candidates evolve into teachers. Some models exist, but a structured application does not seem to be widespread.

This manuscript pertains to the pre-professional field component of the elementary “methods block” at our large, urban, mid-southern research university. The preservice teachers enroll in a block of four (4) concurrent university classes, and we assign them to a specific school with individual teachers for clinical experiences in K–6 classrooms during the semester. Through the university courses and the clinical classroom experiences, the interns begin their transformation from college students into novice classroom teachers capable of managing students, teaching content, and assessing learning. During the series of content coursework, interns create lesson plans, a thematic unit, and an INTASC-based portfolio that we assess using rubrics created for each item. During this clinical methods semester we immerse each of the teacher candidates for 20-plus days in a public school classroom during the course of one semester. Initially, interns, as we call our teacher candidates in this pre-professional semester, are in the clinical school one day per week; however, midway through the semester, students spend two or more days per week in the school setting. The designers of the block courses fashioned this flexibility so the interns could experience quality time in the public school classrooms. As the semester progresses, the interns’ content knowledge and pedagogical skills increase. We note these increases through our clinical observation and graded assignments completed by students as part of the content coursework. Between clinical days, the interns attend campus classes to discuss the events of their clinical classrooms, learn strategies, and strive to make connections between theory and practice.

The authors collaborated to design an instrument that communicated to both interns and mentoring teachers the descriptions of appropriate activities and expectations in the clinical setting. Additionally, we created an instrument for documenting the teacher candidates’ time in the field by asking them to complete a list of specific activities. This list includes observing the environment, observing the mentor teacher’s techniques, teaching at least six lessons, noting classroom management strategies employed, and using both formal and informal assessment strategies. The instrument allows us to evaluate the college student’s readiness for student teaching as well as establish a grade for the pass/fail aspect to meet university reporting purposes. The Clinical Connections Notebook, as we call it, is research-based but not empirically tested. Furthermore, the interns reflect on each field-oriented session with teacher educators’ designed prompts. These reflective typewritten pages accumulate in specific sections of the Clinical Connections Notebook.
Notebook. In essence, this Clinical Connections Notebook becomes a cumulative communication log between a student and his or her professors. It depicts, and documents, the student’s growth as an elementary teacher candidate as well as his or her readiness for the formal student teaching semester. The research base lies in field experiences of interns, socialization of interns into the culture of teaching, and emphasis on how communities of learners mature through reflecting on their experiences.

**Literature Review**

Research about notable structured approaches to assisting teacher candidates in becoming novice teachers is limited. Everhart and Turner (1986) asserted that sophomore education students learn what to look for in an elementary classroom through a series of structured visits to classrooms throughout one semester. In their study, the teacher candidates became a regular part of the classroom environment for the semester by assisting the teachers but not by actually teaching any lessons. Baer and Russomano (1996) discussed a strategy of planning initial teaching experiences in a controlled environment whereby college students taught “lessons” to their peers. Later, daycare children arrived at the university campus where teacher candidates taught these same lessons to the children while viewed by peers who provided critical feedback. However, these situations failed to provide teaching experiences consistent with actually being in the children’s learning environment. Other studies involved children visiting the university classroom. The change in surroundings likely influenced the visiting children, and they may have reacted differently than they might have in their own more familiar environment (Moyer & Husman, 2006).

Socializing interns into the culture of teaching early in their teacher education program increased their familiarity and lessened the stress they may have felt about entering the classroom as a novice teacher (Silverman, 1998; Wadlington, Slaton, & Partridge, 1998). Furthermore, teacher candidates began to understand that teaching required more of them than just presenting lessons (Sikula, Buttery, & Guyton, 1996). Spending time working with children and focusing on the children’s learning helped the interns concentrate on their goal to become better teachers.

Meltzer, Trang, and Bailey (1994) described a format they called clinical cycles whereby junior level teacher candidates created and taught short lessons to a team of student-selected peers and professors who evaluated specific and previously agreed-upon aspects of the lesson. The attributes chosen by the students for the critiques ranged from the related learning tasks and lesson delivery to the impact on learners. The teacher candidates organized and participated in a number of these short teaching/critique sessions throughout their professional coursework. Although the participants generally valued the experiences and professional growth opportunities provided in these safe environments, these situations lacked the spontaneity and authentic responses of actual learners.

Darling-Hammond (1998) advocated organized internships for neophyte preservice teachers where they learned about classroom management, student learning, curriculum resources, available technology, and ways to examine their practice from their mentors in the field. She suggested that the internships involve numerous clinical experiences supported by theoretical understanding. Content must relate to pedagogy, and this relationship must be evident to the interns during their field experience (Adams, Bondy, & Kuhel, 2005; Dewey, 1974; Vavrus, 2002). Specific prescribed experiences and reflections helped students note the behaviors of the cooperating teachers and the students (Anderson, Barksdale, & Hite, 2005). If the teacher educators directed the interns to look for specific phenomena in the classroom, these professors could tie the observations to a classroom discussion of the theoretical underpinnings with the real-world context discovered in the observations. Students who make real connections between theory and practice and then reflect about the experience afterward could expect to become successful teachers (Adams, Bondy, & Kuhel, 2005; Schön, 1983, 1987; Serros, 2005).

Often, preservice teachers entered into their student teaching practice with images of traditional classroom furniture arrangements and preconceived notions, perhaps dating back to their own elementary school days. Unfortunately, they unconsciously fell into the trap of automatically doing what their teachers had done (Moyer & Husman, 2006; Serros, 2005). Additionally, these predetermined notions sometimes
effected the interns’ disposition toward students of diverse backgrounds (Cho & DeCastro-Ambrosetti, 2005; Proctor, Rentz, & Jackson, 2001). Interns eased into their new roles as teachers as they became familiar with current practice and theoretical background, and as they learned to appreciate the wide diversity in today’s classrooms.

A final consideration is the importance of learning communities in the educational setting. Learning is social. Deliberately creating an environment that emphasizes the acceptance of diversity, collegiality, cooperation, honest and open communication, respect, and scholarship encouraged learning communities to flourish (McGrath, 2003). Creating a community where teacher candidates felt safe enough to speak freely was difficult and required the mentor teacher or teacher educator to interact with the students on a personal level (Bryant, 1999; Harada, Lum, & Souza, 2002; McGrath, 2003). By fostering this type of community, teacher candidates were encouraged to solve problems, brainstorm ideas, create new solutions, and gain new teaching and learning perspectives. Additionally, these communities instilled the awareness that teaching and learning were not isolated events but rather part of a community as interrelated strands.

**Specifics of Our Pre-Professional Semester**

Interns typically have high levels of anxiety before experiencing their first few teaching ventures (Everhart & Turner 1996). To assist in their successful journey, we structured the days/weeks and focus of their experiences in the clinical setting. In the remainder of this manuscript, we highlighted the unique structural feature of our program’s Clinical Connections Notebook.

Each semester, including the current one, teacher educators involved in each “block” host a full-day meeting with the interns on the first day of the semester to begin tasks that cultivate this unique community (McGrath, 2003) of learners, talk about expectations, and introduce them to the range of clinical activities that they might carry out. Additionally, the professors introduce the various lists and outlines, and discuss expectations of professional behavior. We desire to build a learning community within the cohort group. Each semester we have 50 to 60 students enrolled in three separate blocks with the teacher educators in each block working together. Approximately one-third of our students are African American and two thirds are Euro-American. Approximately four-fifths of our students are traditionally aged (18–24) females. A small number of the students enrolled are non-traditionally aged (25 and older) females, and there are generally even fewer males of any age range.

With the responsibilities of all parties articulated, the interns know from the beginning what we expect of them and how we will help them (Bryant, 1999; Harada, Lum, & Souza, 2002; McGrath, 2003). We provide interns with a list of activities they can accomplish during the semester, at the discretion of and under the supervision of the mentor teacher (e.g., tutoring, whole group instruction, grading papers, putting up or taking down displays, assessing students, monitoring, assisting the teacher, or passing out materials). Interns also have a series of required tasks to complete (e.g., teaching math, science or social studies lessons, learning the children’s names, written observations of the school and classroom, and interviewing the teacher). It can be overwhelming, but students know what specific tasks (Adams, Bondy, & Kuhel, 2005; Dewey, 1974; Vavrus, 2002) and what observations (Anderson, Barksdale, & Hite, 2005) they will accomplish throughout the semester.

The clinical setting provides the interns with a relatively safe environment in which to watch children learn, observe their mentor teachers conduct lessons, and reflect on the various instructional techniques, and experience teaching a mini-lesson. We developed a schedule of required clinical tasks to assist the interns in furthering their understanding of what it means to become an effective teacher. We divided the documents in the Clinical Connections Notebook into several sections; (a) Clinical Connections checklist, (b) completed clinical assignments (c) reflections written by the Interns, and (d) resources.

**Meaningful Clinical Experiences**

A Clinical Connections Notebook is the focal point of the structured pre-professional semester and a major element that distinguishes our program. Because students often do not know what to look for when
initially observing in a classroom (Everhart & Turner, 1996), we provide specific guidance. Interns have a list of specific prompts or questions to answer each day. These prompts are the focus of their clinical reflections after each clinical day. We indicate to the interns that the Clinical Connections Notebook should become a resource when they are in their clinical settings.

Each of the mentor teachers receives a Mentor Teacher’s Clinical Notebook with information about what the interns will be allowed and required to do, as well as a copy of the calendar given to the interns. By providing the same information to the mentor teachers and the interns, the teachers have knowledge of our expectations for our interns and can better plan experiences. We desire that the intern be actively involved with the children and not sit idly or just grade papers during their entire clinical experience. The activities are more observational in nature during the earlier weeks and move toward increasing teacher-type responsibilities as the semester progresses.

Clinical Connections Checklist

The students’ notebooks contain the Clinical Connections Checklist of suggested clinical activities for the interns, journal-writing guidelines, and expectations for both the cooperating teacher and intern. The Clinical Connection Checklist in Appendix A is an important section in the Clinical Connections Notebook. This document evolved over several semesters and reflects a merger of the individual assignments of the professors involved. We included a version of our intern Clinical Connections Checklist, or outline, of the tasks that the interns must complete. Because completed artifacts are included in the students’ notebooks and because the same teacher educator does not visit each intern every clinical day, this checklist provides a focus for any discussion and a way to track what each intern does. We teacher educators rotate our days so that at least one of us is in the field with the interns each of the 20 days that they visit the clinical site. We think this accountability is important and provides documentation for Pass/Fail aspects of the block.

Completed Clinical Assignments

Interns’ personal experiences of K–12 education often shape their views of the clinical classroom during the first few days. In other words, an intern entering a second grade classroom may unconsciously compare the current classroom with that of his or her own second grade classroom. With varying K–12 background experiences, the interns attempt to absorb all of the happenings at once. Appendix B displays the questions for an assignment called Getting Acquainted with the School, referred to in the Clinical Connections Checklist (Appendix A). This assignment, coupled with the assignment asking for a floor plan of the classroom, challenges interns to become familiar with the clinical site.

We try to gradually introduce the interns to the classroom and their new responsibilities as teachers. During their college coursework, the interns studied a variety of teaching and learning theories as well as behavior management, psychology, and theories of assessment. Putting these theories into practice is difficult for some at first. It is rather like studying about inertia, force, friction, road conditions, and traffic laws. These are helpful, but one must actually drive in traffic before it all comes together.

These interns need support as they enter into the teaching field and learn to connect theory and practice. Ann (pseudonym) noted, “The block was an excellent source for preparing me to student teach…. I was nervous. The block gave me the opportunity to get use (sic) to the classroom setting.” Malea (pseudonym) said, “... I am prepared to handle whatever grade I am assigned to teach.” These two students reflected about their experiences as they prepared for student teaching in a safe and nurturing environment that allowed them to experiment with teaching before the stress of the student teaching semester.

Although the mentor teachers generally provide guidance, occasionally some will allow the interns to struggle in order to help them learn how to pick up the pieces and go on. Perhaps the intern will need to refine and reteach the same lesson another day. Others will need to deal with classroom management issues or grade papers that they assigned. These real life experiences provide some of the support needed to develop effective teachers (Darling-Hammond, 1998; Delgado, 1999).
The interns teach a number of specific content lessons or conduct other designated activities within the classroom. Often these coincide with the assignments given in the university setting. For example, in the mathematics methods portion of the block, the teacher educator introduces the interns to the power of teaching mathematics concepts using manipulatives. Several assignments require that they view a mathematics class where manipulatives are being used, interview the teacher, and then teach a concept discovery activity using this “best practices” strategy. The interns are required to teach two lessons using these mathematics reform tactics emphasizing a constructivist approach advocated by the National Council of Teachers of Mathematics.

Like many other programs, our elementary school program incorporates the separate content areas of mathematics, science, and social studies with an overarching literacy component. Because the literacy coursework occurs before the block module, we challenge the students to create and implement aspects of an interdisciplinary thematic unit. The topic of the unit must be relevant to the clinical teacher's classroom and coincide with content mandated by local and state standards. Additionally, the clinical teacher approves the topic, objectives, and local content standards chosen by the intern. In other words, the theme of the unit might be basket weaving if this is what the clinical teacher deems appropriate for his or her class and the lessons chosen by the intern meet required standards.

Observation of the Interns by the Teacher Educators

The teacher educators responsible for university course content observe the interns throughout the semester. We recognize that these observations are a common feature of many other programs. During the visits to the elementary classrooms, the authors, who are two of the teacher educators in one block, note the progress on the Clinical Connections Checklist and review any accumulated documents the intern has, and make pertinent comments. They often write informal notes for the interns on carbonless memos obtained from an office supply store, thus providing a record of each informal observation for both the intern and the professor. The intern and teacher educator discuss the visit at a convenient time afterward. A quote from Sally (pseudonym) sums up a feeling expressed by many students, “I was nervous, but now I am so much more confident…. I feel very prepared [to student teach next semester].”

Reflections Written by the Interns

While observations help familiarize interns with the physical and procedural aspects of school, they do not necessarily prepare interns to develop the habits of mind for future growth as educators. We think that the guided reflections are the most important part of the interns’ development, which is why reflection is a key component of the Clinical Connections Notebook. For a reflection to provide an on-going learning process, we also recognize that interns must complete reflective journal entries soon after they complete each clinical day. This echoes work by Everhart and Turner (1986). Initially, we began with a few basic prompts: (a) What went well? (b) What went wrong? (c) What would you do differently and why? And (d) Analyze how you would modify the lesson using professional resources. However, we discovered that the novices described their activities for the day and only superficially answered the questions. After the students began teaching, their journal entries were to include the following additional questions: (e) What was the knowledge base of the students prior to the lesson? In other words, what did they not know about the topic? Discuss the evidence that illustrates this and (f) What do the students know now? Discuss the assessment and the results of the assessment.

Although these teacher candidates have spent many clock hours in the clinical classroom since their sophomore year, they may not have acquired the intended lessons related to increasing their understanding about teaching (Baer & Russomano, 1996). For example, interns who have never thought about the types of questions that an effective teacher asks during a lesson may not realize how various questions can elicit differing insights into learning, expand student thinking, or inhibit student response. Additionally, these same interns may watch a teacher supervising a cooperative learning lesson in a fifth grade classroom and take copious notes about what they saw the children physically doing but miss the
fact that they were demonstrating Vygotsky’s (1962) concept formation. For this reason, we think that the guided reflections are the most important part of the interns’ development.

In the Fall 2002 semester, the secondary author initiated specific journal writing prompts, but the resulting reflections lacked depth of understanding. The interns appeared to view these directions as meaningless, or difficult, and ignored them. The secondary author added specific prompts for the first seven clinical days. In subsequent semesters, we retained the above questions for reflection about each teaching episode, but in Spring 2004, the primary author wrote specific prompts for the interns to answer after each of the 20 clinical visits. Still the interns procrastinated in reflecting about the recent clinical experience, thus losing valuable insight and the potential growth experience. Consequently, interns now email their reflections within a three-day limit to one teacher educator. In this way, the interns have precise aspects of teaching and learning about which they are to experience coupled with an opportunity for growth. Appendix C contains samples of the reflection questions.

These authors’ experiences in following both interns and student teachers into the classroom guided the progression of the design of the questions. The questions coincide with discourse that occurs in the university classroom just before the interns make their next visit to the clinical setting. For example, a teacher educator might discuss classroom procedures and management just before the interns must reflect upon the procedures and management strategies employed by the cooperating elementary teacher at the clinical site.

Resources

Students reserve one section in their notebook for notes, schedules, syllabi, and other pertinent paperwork for their personal reference. The completed Clinical Connections Notebook represents documentation of each intern’s pre-professional semester.

The organization outlined above allows the teacher educators to quickly assess the quality of the completed tasks, provide feedback comments, and initial items on the checklist as we review them. The Clinical Connections Notebook becomes a written communication tool between the intern and his or her professors. We think it becomes useful to the interns as a vehicle that helps them transition from college students into novice teachers and provides accountability for their clinical activities.

Conclusion

The use of the Clinical Connection Notebook provides structure for the interns as they enter the teaching world. The reflection questions provide a progression of foci that seem to connect to the development of their awareness of the skills they are to acquire as a teacher (Sikula, Buttery, & Guyton, 1996). The requirement to reflect promptly assists in the interns’ growth and awareness of the complexities of teaching. Likewise, it helps them to begin a habit that encourages continual professional growth.

We think the Clinical Connections Notebook is a vehicle by which interns connect theory and practice (Adams, Bondy, & Kuhel, 2005; Dewey, 1974; Vavrus, 2002). This structure promotes the metamorphous of changing college students into novice teachers. This transformation was most apparent when a young male teacher candidate appeared at the beginning of one semester. This college student’s work was “marginal” at best during the beginning of the block semester and “average” later on. He did not seem to care about the quality, but rather wanted to finish and “check it off” the required checklist. By the end of student teaching, he was a confident teacher who took books home to study so he could present material clearly. He worked diligently to make his lessons interesting. He volunteered regularly to help with the mentor’s other duties and made insightful comments to his mentor and university supervisors. He informed the teacher educators about the helpfulness of the Clinical Connections Notebook and recognized its purpose.

The interns who do not take the Clinical Connections Notebook requirements seriously often have problems connecting theory and practice. An intern who viewed the assignments as “busywork” realized she might not pass if the assignments were not present and hurriedly added them at the end. Her
Initiating Elementary Teacher Candidates

reflections lacked understanding and her lesson plans lacked completeness. During her student teaching, she allegedly had many problems with the practical aspects of teaching. She is currently in her first year of teaching and, reportedly, continues to have difficulty. The Clinical Connections Notebook, with accompanying checklists, gently prods the interns to recognize the connections between teaching and learning, and between theory and practice.

References
Appendix A
Interv Clinical Connections Checklist

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<tr>
<th>Items to be completed by Interns</th>
<th>Date</th>
<th>Intern’s Initials</th>
<th>Mentor’s Initials</th>
<th>Professor’s Initials</th>
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<td>Create a classroom layout of this classroom using computer drawing software</td>
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<td>Getting acquainted with the school</td>
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<td>Class schedule emailed to professors</td>
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<td>Supervise a whole group activity</td>
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<td>Interview of teacher</td>
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<td><strong>Journal entries / reflections</strong></td>
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<td>-cols deleted for space consideration. Include enough rows for each clinical day.</td>
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<tr>
<th>Teach at least one lesson using each of these models:</th>
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<th>Mentor’s Initials</th>
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<tr>
<td>1. Cooperative Learning</td>
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<td>2. Inquiry</td>
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<td>3. Concept Attainment</td>
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<td>4. Concept Discovery</td>
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<td><strong>Complete the following:</strong></td>
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<td>Science: Inventory of classroom supplies</td>
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<td>Science: Observation of a lesson</td>
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<td>Science: Teaching (topic)</td>
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<td>Math: Inventory of classroom manipulatives</td>
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<td>Math: Analyze classroom discourse</td>
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<td>Math: Observation of a lesson</td>
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<td>Math: Observation of math processes</td>
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<td>Math: Teaching (topic)</td>
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<td>Math: Teaching (topic)</td>
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<td>Math: Detailed analysis of students’ thinking</td>
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<td>Social Studies: Inventory of classroom supplies</td>
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<td>Social Studies: Observation of a lesson</td>
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**Appendix B**

*Getting Acquainted with the School*

**Observations of the School:**
- How are the grades grouped?
- How do teachers work together (i.e., teams, blocks, pods):
- How are the classes scheduled for lunch?
- How are the parents received into the building and into the classroom?
- Where are the support classrooms? (Music, P.E., etc.)

**Observations of the Classroom:**
- Create a classroom floor plan that you can later recreate on your computer using drawing software
- Describe the ethnic and racial makeup of the classroom
- Describe the discipline management system employed
- Take an inventory of manipulatives/resources for each content area
- Note the transition techniques the mentor teacher uses
- Describe the mentor teacher’s teaching style
- Note the interactions between the mentor and students.

**Students and Class Schedules**
- Make a seating chart using computer software
- Learn the students’ names
- Make a class schedule that includes lunch, conference period, and ancillary classes.
Appendix C

REFLECTION is the key to learning about teaching. Use the technique in your assignments throughout this BLOCK semester and in future endeavors. Learn this technique to increase the awareness of what it means to become an effective teacher.

Use the prompt below to write your FIRST reflection about your experiences. Do not tell what happened blow by blow. Instead, relate your thoughts, feelings, and insights about the incident/ happening. Delve into the topic and then send the DATED reflection by email to Dr. Professor. Additionally, place a hard copy in your Clinical Connections notebook under “Reflections.”

Reflection # 1: What ONE thing did I learn today about teaching in an elementary school that I had never thought about before? Relate this in detail telling how you believe this will affect your progress of becoming an effective teacher.

Reflection # 2: Look around the classroom where you are doing your clinical.
   1. Describe the classroom in terms of its appeal to students, adults, and educators.
   2. How does it portray the clinical teacher's overall philosophy of education? Give examples of how you have determined this in light of the environment you described earlier.

Reflection # 6: The arrangement of the classroom is very important. We discussed arranging the classroom by giving thought to accessibility, visibility, and distractibility.
   · How does your mentor address accessibility, visibility, and distractibility?
   · If you designed this classroom, would you do anything differently? Why?

Reflection # 9: The classroom is an interesting place full of social encounters, activities, and questions. The focus of today’s investigation is “Questions”. Focus on the two definite types of questions: Closed-ended and Open-ended.
   · Listen to the type of questions that the mentor teacher uses. List at least three of her questions for each type.
   · Notice the reaction/answers to the questions he/she asks. Describe what occurs with the different types of questions. Discuss these differences and how the effective use of questioning can assist in student learning.

Reflection # 12: Teachers use various instructional strategies with their students. Each branch (constructivist or behaviorist) can be effective with particular children in certain situations.
   · What instructional strategies have you observed your mentor using this week?
   · How do/did the children react to the strategies employed? Why do you think this is so?

Reflection # 15: Ask your clinical teacher about a particular lesson that she plans to teach today. Look at her lesson plans if available, or talk to him/her about the teaching strategies that he/she will use. Investigate the textbook material by looking at the teacher’s edition of the content textbook.
   · View the lesson from the eyes of a student, and from the eyes of an educator.
   · What were the strengths of the lesson? What were the objectives of the lesson? Write these in the format given telling the Bloom’s Taxonomy level and the assessment strategies. What strategies did the teacher use to meet the objectives?
   · What would you have done differently? Explain in detail.
Reflection # 20: This is your last clinical day this semester. Your mentor develops a professional development plan as part of his/her yearly evaluation.

- Explain your strengths as a teacher.
- Explain your areas for growth and your plan of action in attaining that growth.