**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

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| **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.*** | | | | | |

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

Visit Number:       Date of the next visit:

Teacher Candidate’s Signature:

Support Supervisor’s Signature: