

Professional Experience Feedback Form

HoPP / University Supervisor

The completion of this form would greatly assist the Professional Experience Office to improve the Professional Experience for Student Teachers, Classroom Supervising Teachers and University Supervisors.

Thank you for your participation.

Please return this form to:

The Professional Experience Office
School of Education
The University of Notre Dame Australia
PO Box 944
Broadway NSW 2007

Fax: (02) 9211 2193

Please comment on your role as a HoPP/ University Supervisor and, if required, what could be done to improve your preparedness from an organisational perspective.

Please comment on how well prepared the Student Teacher was for undertaking the Professional Experience and, if required, what could be done to improve his/her preparedness.

Please comment on the how well prepared the Classroom Supervising Teachers were for taking the Student Teachers, and if required what could have been done to improve their preparedness.

Please provide any other general comments, positive or negative, on the whole Professional Experience.

School: _____ Year Level: _____

Name (Optional) _____ Date: _____