

**TO BE COMPLETED BY THE PROGRAM AREA COMPETENCY REVIEW COMMITTEE:**

**Pre-Professional Stage Competency Review**

The program area committee has reviewed the following information on this candidate:

Internship Application with autobiography	Yes	No
Professional Dispositions Forms	Yes	No
Midterm Evaluation from the Field Experience	Yes	No
Available Work Samples from Program Area Methods Classes	Yes	No
Field observations from the Mentor Teacher and/or the University Supervisor	Yes	No

We recommend that this candidate be admitted to the Professional Stage and we recommend the following be considered when placing this student:

We do not recommend that this student be admitted to the Professional Stage for the following reasons:

Signatures of program area competency review committee:

_____ Signature	_____ Date
_____ Signature	_____ Date
_____ Signature	_____ Date

**TO BE COMPLETED BY THE DEPARTMENT CHAIR:**

I have reviewed the student's overall performance to date in the Teacher Education Program and recommend that the student be allowed to participate in the internship phase of the Teacher Education Program.

\_\_\_\_\_  
Department Chair's Signature

\_\_\_\_\_  
Date

**TO BE COMPLETED BY THE DEPARTMENT CHAIR of CLES:**

I have reviewed the student's overall performance to date in the Teacher Education Program and recommend that the student be allowed to participate in the internship phase of the Teacher Education Program.

\_\_\_\_\_  
Chair, Dept. of CLES

\_\_\_\_\_  
Date