School of Education: Education Specialist INTERN Pathway

FINAL THREE-WAY CONFERENCE
(To be completed at the end of each semester the candidate is in the program)

MEETING DATE: ________________ SCHOOL SITE: _______________________

COUNTY: ________________ GRADE(S): ____________ SETTING: ____________

Present at the Meeting: (signatures):

Candidate: __________________________ Local Support Teacher: ________________

University Supervisor: ________________ Administrator: ________________

1. Review the:
   - TPE & CANDIDATE DISPOSITION EVALUATION FORMS

2. Review and collect the completed:
   - UNIVERSITY SUPERVISOR’S OBSERVATION FORMS

3. Review and collect the following forms:
   - ALL PRIOR LESSON PLAN FORMS FROM OBSERVED LESSONS: Parts A, B & C.

4. Review and collect the:
   - INTERN REQUIREMENT CHECKLIST WITH ACTIVITY LOG (72 HRS), PLUS THE ADDITIONAL 23 HOURS OF INSTRUCTION WITH ENGLISH LEARNERS

FINAL SEMESTER ONLY: TEACHER PERFORMANCE ASSESSMENT (TPA)

5. All required components of the TPA have been submitted:
   - Yes
   - No
   - If no, what is the plan to complete the TPA