

2005 Title II Federal Report Institutional Report Card

Greensboro College

Pass-Rate Data: Regular Teacher Preparation Program

Academic Year: 2003-2004

Testing Period: 10/03-9/04

Number of Program Completers: 25

Type of Assessment	# Taking Assessment	# Passing Assessment	Institution Pass Rate %	Statewide Pass Rate %
Basic Skills				
PPST/CBT	23	23	100	88
Specialty Area/Professional Knowledge/Content Area				
Elementary Education (K-6)	12	11	92	96
Physical Education (K-12)	2	**	**	74
Special Education: Mentally Disabled (K-12)	2	**	100	96
Special Education: Learning Disabilities (K-12)	1	**	100	96
Social Studies (9-12)	1	**	**	95
Mathematics (9-12)	3	**	**	81
Music (K-12)	1	**	**	90
Middle Grades: Mathematics (6-9)	1	**	**	98

**To protect confidentiality of student records, pass rates based on fewer than ten test takers are not printed.

^Statewide averages not available at the time of printing.

Aggregate and Summary Institutional-Level Pass-rate Data: Regular Teacher Preparation Program

Institution Name: Greensboro College				
Academic year: 2003-2004				
Total number of program completers: 25				
Type of Assessment [^]	# Taking Assessment	# Passing Assessment	Institution Pass Rate %	Statewide Pass Rate %
Aggregate: Basic Skills*	23	23	100	88
Aggregate: Professional Knowledge/Content Area*	20	18	90	89
Aggregate: Academic Content Areas (math, English, biology, etc.)*	8	***	88	88
Aggregate: Other Content Areas (elementary education, career/technical education, health education, etc.)*	12	11	92	96
Aggregate: Teaching Special Populations (special education, ESL, ...)*	3	***	100	94
Performance Assessments*				
Summary of Individual Assessments**	23	21	91	93
*Aggregate pass rate-Numerator: Number who passed all the tests they took in a category (and within their area of specialization). Denominator: Number of completers who took one or more tests in a category (and within their area of specialization).				
**Summary pass rate-Numerator: Number who passed all the tests they took within their area of specialization. Denominator: Number of completers who took one or more tests used by the state (and within their area of specialization).				
***To protect confidentiality of student records, pass rates based on fewer than ten test takers are not printed.				

^Statewide averages not available at the time of printing.

Institution Level Survey

1.) Please complete the following demographic questions about yourself and institution.

Institution Name: Greensboro College
 Respondent Name: John Hemphill
 Respondent Title: Director of Teacher Education
 Respondent Phone Number: (336)272-7102, ext. 368
 Respondent Fax Number: (336)217-7236
 Respondent E-mail Address: jmhemphill@gborocollege.edu
 Respondent Address: 815 W. Market Street
 Greensboro, NC 27401-1875

2.) *Please specify the cohort start and end years (e.g. 1999-2000)*

Cohort Start Year: 2003

Cohort End Year: 2004

3.) *Please complete the following questions as accurately as possible.*

3a) Number of students enrolled in teacher preparation programs: 226

3b) Total number of regular and alternative students in programs of supervised student teaching: 25

4.) *Supervising faculty includes all persons having faculty status, who were assigned to provide supervision/evaluation of student teaching. Complete the following questions as accurately as possible.*

4a) Total number of full-time faculty in professional education that supervise student teachers: 7

4b) Total number of part-time faculty, employed full-time by IHE, that supervise student teachers: 6

4c) Total number of part-time faculty, not otherwise employed by IHE, that supervise student teachers: 1

4d) Total number of supervising faculty for the teacher preparation program: 14

4e) Student to faculty ratio (divide 3b by 4d): 1.7

5.) *Please complete the following questions as accurately as possible.*

5a) Average number of hours per week required of student participation in supervised teaching: 40

5b) Total number of required weeks of supervised student teaching: 15

5c) Total number of hours required: 600

6.) *Is the program approved/accredited by the state:* Yes

7.) *Is your teacher preparation program currently under designation as low-performing by the state:* No