



Clinical Practicum Checklist

Steps:

The Clinical Practicum is offered every Spring semester. Clinical Practicum Audit forms must be submitted to the Teacher Education Office by November 1st.

1. Complete the candidate portion of the audit form.
2. Meet with advisor to complete the advisor section of the audit form.
3. Take audit form to Registrar for final completion. (**Before deadline**) The Registrar will return the completed form to the Teacher Education Office.

Licensure Completion Requirements

- An acceptable Teaching Portfolio will be submitted as part of the practicum.
- A copy of the Teacher Performance Appraisal Instrument (TPAI) completed by the candidate's principal/supervisor will be submitted to the Teacher Education Office. All components of the TPAI must show an evaluation of "At Standard".
- The Greensboro College Clinical Evaluation Instrument (GCCEI) will be completed at the conclusion of the practicum. The supervising faculty and the candidate will complete the GCCEI independently. The completed GCCEI with supervising faculty and candidate signatures will be submitted to the Teacher Education Office.
- PRAXIS II passing scores must be on file before a recommendation to clear a license will be sent to NCDPI.

Greensboro College Teacher Education Program Clinical Practicum Audit

SSN: _____ - _____ - _____

Name _____
Last First Middle

Maiden Name (if applicable) _____

Address _____ Local (____) _____

Email _____

Licensure Area:

- Birth-Kindergarten
- Preschool Add-on
- Elementary

Secondary:

- Biology (9-12)
- English (9-12)
- Mathematics (9-12)
- Social Studies (9-12)

K-12 Programs:

- Art (K-12)
- Music (K-12)
- Physical Education (K-12)
- Spanish (K-12)
- Theatre (K-12)

Special Education (K-12)

- Adapted
- Generalist

Name of the school and district for the clinical practicum.

_____ School

_____ School District

I hereby authorize the release of my records for the purpose of evaluation for the clinical practicum. I understand that all course requirements must be completed prior to registering for the clinical practicum.

_____ Date

_____ Signature

ADVISOR SECTION

Formal conference completed _____
(Date and advisor's initials)

Advisor _____

The candidate has completed all course requirements with the exception of the clinical practicum.

Comments:

TO BE COMPLETED BY REGISTRAR

Greensboro College GPA _____ Candidate has completed all courses to date with at least a "C" _____
Registrar's initials and date

List courses enrolled in this semester _____

Audit of remaining requirements _____
