



**COOPERATING TEACHER/TEACHER
CANDIDATE AGREEMENT**

School: _____ City: _____ State: _____ Sch. Phone: _____

Grade/Subject(s): _____ Cooperating Teacher(s): _____

Teacher Candidacy Dates: _____ Semester/Year: _____

Directions: Please read the agreement sections of both the cooperating teachers and student teachers. If you agree, please sign the acknowledgement section below.

Cooperating Teacher Agrees to:	Teacher Candidate Agrees to:
Be specific in directions for all work assignments and due dates.	Put forth his/her best effort, arrive on time, be well prepared, and meet all deadlines.
Acquaint/integrate the teacher candidate with/into the classroom, school, and district environment and policies.	Maintain a professional attitude toward all members of the school community.
Actively model effective planning for instruction throughout the experience.	Know, follow, and enforce rules, regulations, and policies of the cooperating teacher and school.
Provide specific and meaningful feedback of teacher candidate's performance.	Prepare written unit and lesson plans for any teaching assignments in advance of teaching as prescribed.
Function as a mentor/resource person in matters pertaining to classroom and professional practice.	Be proactive to improve teaching skills by being reflective, observant of other teaching methods, and taking constructive criticism.

Checklist: All items listed below must be completed and checked off prior to the start of the teacher candidacy experience and before returning this form.

- _____ Cooperating teacher has been provided a copy of the Teacher Candidacy Policies of WLC.
- _____ Cooperating teacher and teacher candidate have discussed expectations/roles/assignments.
- _____ Teacher Candidate and cooperating teacher have set next meeting date and time for _____.
- _____ Teacher Candidate has been or will be provided a school/district handbook and/or other materials to help prepare for the teacher candidacy experience.

Acknowledgment and Acceptance: I have reviewed this document and discussed its contents. My signature means that I understand what is expected of me as a cooperating teacher or teacher candidate and that I will do my best to follow the aforementioned guidelines/ agreement.

Cooperating Teacher

- _____ I accept the student teaching placement.
- _____ I do not accept the placement.

Teacher Candidate

- _____ I accept the teacher candidacy assignment.
- _____ I do not accept the assignment.

Cooperating Teacher Signature

Teacher Candidate Signature

**This completed and signed form must be returned to the
Director of Teacher Education's office prior to
the start of teacher candidacy.**