College of Education at Wichita State University
University Supervisor Supervision Report

Student Teacher ________________________________________  Semester _________________________
Cooperating Teacher _________________________________  Supervisor ___________________________
School ______________________________________  Gr.Level(s)/Subject(s) _________________________

Initial Visit:  Date ______________________  Time In __________________  Time Out ______________
Check all that apply.  Conferred with principal _____  Observed student teaching ______________
Conferenced with cooperating teacher _____  Conferenced with student teacher ______________
Comments:  

Abbreviated Observation:  Date ______________________  Time In _________  Time Out ______________
Check all that apply.  Conferred with principal _____  Observed student teaching ______________
Conferenced with cooperating teacher _____  Conferenced with student teacher ______________
Comments:  

Observation #1:  Date ______________________  Time In _________  Time Out ______________
Check all that apply.  Conferred with principal _____  Observed student teaching ______________
Conferenced with cooperating teacher _____  Conferenced with student teacher ______________
Comments:  

Observation #2:  Date ______________________  Time In _________  Time Out ______________
Check all that apply.  Conferred with principal _____  Observed student teaching ______________
Conferenced with cooperating teacher _____  Conferenced with student teacher ______________
Comments:  

Observation #3:  Date ______________________  Time In _________  Time Out ______________
Check all that apply.  Conferred with principal _____  Observed student teaching ______________
Conferenced with cooperating teacher _____  Conferenced with student teacher ______________
Comments:  

Record dates of additional visits/observations here:

Final Visit:  Date ______________________  Time In _________  Time Out ______________
Check all that apply.  Conferred with principal _____  Observed student teaching ______________
Conferenced with cooperating teacher _____  Conferenced with student teacher ______________
Comments:  

Signature of Supervisor ________________________________________  Final Grade Issued _________

Elementary Supervisors:  Submit to your University Supervisor within ten days after the end of the semester.  Others:  Submit to Dr. Peggy Anderson, 107 Corbin (same time requirement as above).