



# Student Teaching Self Evaluation Form

## Introduction

Student

Date

## Areas of Interest

Check below areas of interest:

- |   |   |                                       |  |
|---|---|---------------------------------------|--|
| <input type="checkbox"/> Infant/Toddler | <input type="checkbox"/> ECE Director           | <input type="checkbox"/> Spanish      | <input type="checkbox"/> Choir         |
| <input type="checkbox"/> Preprimary     | <input type="checkbox"/> Athletic Director      | <input type="checkbox"/> PE           | <input type="checkbox"/> Music         |
| <input type="checkbox"/> Primary grades | <input type="checkbox"/> Coach                  | <input type="checkbox"/> Art          | <input type="checkbox"/> Pioneers      |
| <input type="checkbox"/> Urban ministry | <input type="checkbox"/> Organist               | <input type="checkbox"/> Band         | <input type="checkbox"/> Sunday school |
| <input type="checkbox"/> World missions | <input type="checkbox"/> Technology coordinator | <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Youth groups  |
|   |   |                                       | <input type="checkbox"/> Drama         |

Other Interests:

## Evaluation

Technology skills:

- very capable
- capable
- limited

Indicate any involvement during your college years with evangelism, urban ministry or with individuals with special needs. Please include the type of experience (i.e., Daylight trips, MMA, Jesus Cares), location, and length.

List three of your strong points or characteristics.

List three of your weak points or characteristics.