

Appendix 4 – Course Convenor/Liaison Report

Instructions to Course Convenor/University Liaison			
Upon completion, this document is to be returned to the Work Integrated Learning Office			
Course Convenor/Liaison Staff Information			
Name of Course Convenor/ Liaison staff member			
Date of Visit			
School Name			
Details of Teacher Education Student			
Teacher Education Student Name		Method/s 1. 2.	Program
Supervising Teacher Name		School Coordinator Name	
Direct Contact with	• Supervising Teacher • School Coordinator • Teacher Education Student		
Teacher Education Student Requirements			
Please tick appropriate box upon sighting the following completed documentation:			
<input type="checkbox"/> Timetable	<input type="checkbox"/> Up-to-date Lesson Plans	<input type="checkbox"/> Observation Tasks	
<input type="checkbox"/> Lesson Observations	<input type="checkbox"/> Teaching Materials		
General Comments			
Strengths/ Concerns raised by the Supervising Teacher			
Strengths/ Concerns raised by the Teacher Education Student			
General comments of this placement for Professional Experience			
For the Attention of the Course Coordinator			
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