GRADE EQUIVALENCY

Instructions to the BA Program Faculty Advisor: State of Vermont regulations require that students seeking licensure as teachers demonstrate intellectual competence as attested by a “B” average overall in their college work and a “B” average in their field of major studies. In traditional programs the student’s grade point average attests to the student’s academic performance. In the BA Program (formerly known as ADP), which employs narrative evaluations, the student’s competence should be demonstrated by academic work of equivalent quality. To help us to assess the student’s competence and appropriateness for the teaching profession, please respond to the questions below. (Program Assistant Director will distribute to faculty. Faculty will return the completed form ASAP to the Program Assistant Director.)

Student’s Name_________________________ Faculty Advisor_____________________

Option__________________________ Term Dates_____________________________

Study Title_______________________________________________________________

1. How sound are this student’s writing skills? Organizational skills? Ability to handle complexity, both academically and experientially?

2. How strong was this student’s academic work with you? Please touch on strength of dialogue, quality of products, submitting work on time, other pertinent aspects.

3. What aspects of this student’s interpersonal skills, in your opinion, will help the student as a teacher? Are there any which might raise problems?

4. Do you have, or are you aware of, any reservations about this student’s undertaking a student teaching project, or about entering the teaching profession?

5. In view of the quality of this student’s academic work with you, do you think that the student should be encouraged to pursue licensure?

6. Regarding the student’s academic work, please check the most appropriate rating below.

   _____ Below Average _____ Average _____Good _____Very Good _____ Excellent

FACULTY ADVISOR SIGNATURE______________________________________DATE______

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