

MnSTOI Teacher Demographics Form

Teacher Data

Teacher name _____

Undergraduate Degree(s) including majors with dates completed _____

Current certification(s) by grade level and subject matter _____

Institution(s) attended _____

Circle one: Student teacher First Year Teacher Second year teacher Third year teacher

Courses (areas) currently teaching _____

Are you currently involved in a mentoring program or graduate study (Circle one if applicable).

Briefly describe your work in this area on the back of this form.

List title of college science courses that you have taken. (Use reverse if needed.): _____

List volunteer/work experiences (and dates) that have contributed to your development as a science teacher.

(Use reverse if needed): _____

School Data

School name _____ District _____

Grade _____ Subject _____ Rm#/Location _____

Contact Phone Number _____ (H) _____ (S) ext _____

Email address _____ Fax number _____

Best time to contact at school _____

Class Data (Observed class)

Total number of students _____ School size (approximate) _____

Number Male _____ Number Female _____

How many of your students are in each language category?

English proficient _____ Limited English _____

How many of your students have the following exceptionalities?

Deaf _____ Developmentally disabled _____ Emotionally or behaviorally disabled _____

Gifted _____ Physically disabled _____ Other (please specify) _____

With respect to ethnicity, how many of your students are in each category?

African American _____ Asian _____ Chicano _____ Native American _____ White _____

Other (please describe) _____

Course Data (Observed class)

Title of Course: _____ Text/Curriculum Materials used: _____

Class minutes/day _____ Class meetings/week _____ Semester or Year Course (Circle one)

Course materials used: Text(s) _____ Manipulatives _____ Class computer _____ School Computer lab _____

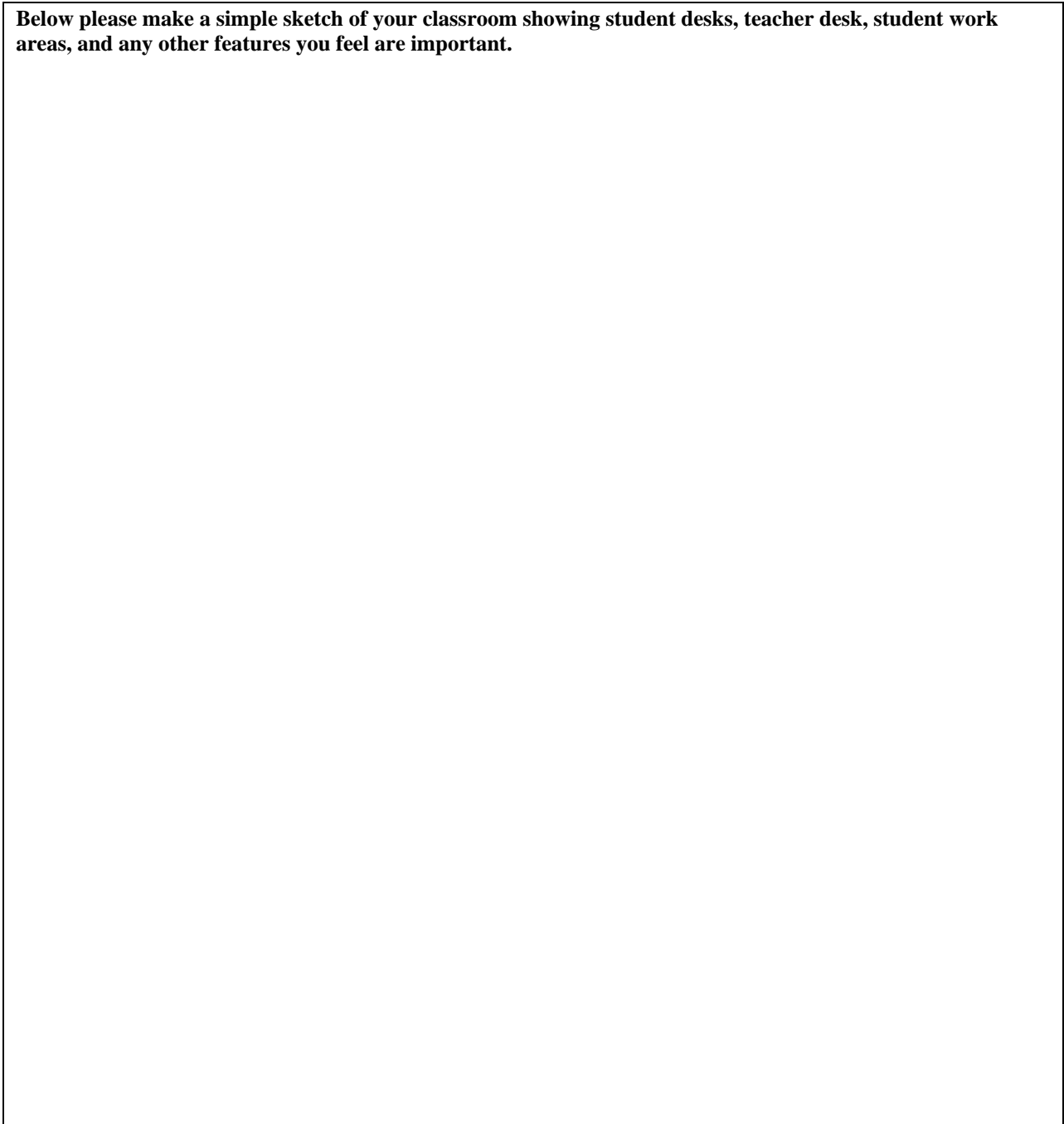
Other (please specify) _____

Observer Data Observer's Name _____ University _____

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Additional space (if needed) for description of involvement in mentoring program or graduate study, to list title of college science courses, and/or to list volunteer/work experiences (and dates) that have contributed to your development as a science teacher.

Below please make a simple sketch of your classroom showing student desks, teacher desk, student work areas, and any other features you feel are important.

A large, empty rectangular box with a thin black border, intended for a hand-drawn sketch of a classroom. The box is positioned below the text prompt and occupies most of the lower half of the page.