

Individual Development Plan (IDP)

Teacher Candidate Name: _____

At the completion of final student teaching, Fresno State Teacher Candidates will work collaboratively with the University Program Supervisor and District-Employed Supervisor to reflect and complete an Individual Development Plan (IDP). This plan is based on the results of the Fresno Assessment of Student Teachers (FAST) assessments; Assessment/Goal Setting forms; classroom observations; and other indicators of performance. Using these resources the teacher candidate, in collaboration with his or her University Program Supervisor and District-Employed Supervisor, will identify *two* goals related to the Teacher Performance Expectations/California Standards for the Teaching Profession. Teachers will use this information as well as artifacts and work from their teacher preparation as planning tools when meeting with their district Induction Mentor during their first year of teaching.

Directions:

1. Based on an evaluation of your teaching using the resources listed above, select two Teacher Performance Expectations within the *California Standards for the Teaching Profession* on which to focus during the initial phase of your professional Induction period.
 - TPE 1: Engaging and Supporting Students in Learning
 - TPE 2: Creating Maintaining Effective Environments for Student Learning
 - TPE 3: Understanding and Organizing Subject Matter for Student Learning
 - TPE 4: Planning and Designing Learning Experiences Students
 - TPE 5: Assessing Student Learning
 - TPE 6: Developing as a Professional Educator
2. Identify each of the selected standards *by number*. Write a corresponding, very specific, measurable professional growth goal for *each* of the selected standards.

TPE ____ Professional Growth Goal:

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The graduating teacher candidate is responsible for completing this document, acquiring the signatures of his/her University Program Supervisor and District-Employed Supervisor and submitting this signed plan to the Induction Director and/or Support Provider, as requested, for use in the Induction Program.

Teacher Candidate Signature: _____ Date: ____/____/2017

Program Supervisor Signature: _____ Date: ____/____/2017

District-Employed Supervisor Signature: _____ Date: ____/____/2017