

Initial Teacher Training Form ITT 04



PGCE secondary applicants only School Experience report

Please be aware that candidates may request to see the completed form. Please return the form direct to teachertraining@glos.ac.uk

Name of Applicant:

UCAS Number:

Subject:

Activities undertaken over the period of ...3...days school experience

Empty space for reporting school experience activities.

Personal qualities	Excellent	Good	Acceptable	Poor
Relationships with staff				
Relationships with students				
Enthusiasm				
Commitment/motivation				
Initiative				
Willingness to learn				
Communication				
Resilience				

Particular strengths. Please comment on strengths eg subject knowledge, communication skills.

Empty space for reporting particular strengths.

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(continued)



Suitability for teaching

Please give details overleaf if there are reservations about the candidate or s/he is not suitable

Highly recommended	Recommended	Some reservations	Not suitable

Reservations about candidate

Name of School:

Tel: Email Address:

Address:

.....

Personal details

Name (print): Position:

Signature: Date:

Tel: Email Address:

Please tick the box if you would like a member of Course Leadership to contact you.

Thank you for taking the time to complete this report for this applicant to the PGCE course at this institution. Your views and opinions are greatly valued and appreciated. Please return the form direct to teachertraining@glos.ac.uk