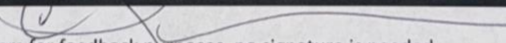


Name of Presenter: Katherine Brooke

Carneil Lewis  
Executive Director

Title of Student Teaching Lesson Plan Topic: Dental Hygiene Homecare Routine

|  | Effective | Needs Improvement | Ineffective | Not Done |
|--|-----------|-------------------|-------------|----------|
| <b>ANTICIPATORY SET</b>  |           |                   |             |          |
| Introduced Topic   | 3         | 2                 | 1           | 0        |
| Gained Audience Attention  | 3         | 2                 | 1           | 0        |
| Activated Prior Knowledge  | 3         | 2                 | 1           | 0        |
| Established Rationale  | 3         | 2                 | 1           | 0        |
| Presentation of Objectives   | 3         | 2                 | 1           | 0        |
| <b>LESSON CONTENT</b>  |           |                   |             |          |
| Knowledgeable of Content & Factual Information   | 3         | 2                 | 1           | 0        |
| Well-Prepared (did not read from notes)  | 3         | 2                 | 1           | 0        |
| Organized & Logical  | 3         | 2                 | 1           | 0        |
| Comprehensive & Aligned with Objectives  | 3         | 2                 | 1           | 0        |
| Managed Time (started & ended on time)   | 3         | 2                 | 1           | 0        |
| Appropriately Used Media (PowerPoint)  | 3         | 2                 | 1           | 0        |
| <b>SUMMARY</b>   |           |                   |             |          |
| Summarized Major Points & Related Back to Objectives   | 3         | 2                 | 1           | 0        |
| Effectiveness of Critical Thinking Activity  | 3         | 2                 | 1           | 0        |
| <b>TEACHER TACTICS</b>   |           |                   |             |          |
| Effective Questioning Techniques & Engaged Learners  | 3         | 2                 | 1           | 0        |
| Pace & Use of Wait Time  | 3         | 2                 | 1           | 0        |
| Conveyed Enthusiasm; Appropriate Humor   | 3         | 2                 | 1           | 0        |
| <b>VERBAL &amp; NONVERBAL BEHAVIORS</b>  |           |                   |             |          |
| Eye Contact; Facial Expressions  | 3         | 2                 | 1           | 0        |
| Movement; Gestures; Rapport  | 3         | 2                 | 1           | 0        |
| Avoided Unnecessary Words ("uh, so, ah, um, ok", etc.)   | 3         | 2                 | 1           | 0        |
| <b>TOTAL POINTS EARNED: 51 / 57 (Total Points Possible)</b>  |           |                   |             |          |
| <b>Site Supervisor's Signature:</b>  |           |                   |             |          |
| <b>*NOTE:</b> If completed by learners for feedback purposes, no signature is needed.                                    |           |                   |             |          |
| <b>List Strengths of the Presentation:</b> Very Informative and helpful to staff and participants                        |           |                   |             |          |
| <b>List Suggestions for Improvement:</b> N/A   |           |                   |             |          |

Great job!!

Name of Presenter: Katie

Title of Student Teaching Lesson Plan Topic: Denture Care

|                            | Effective | Needs Improvement | Ineffective | Not Done |
|----------------------------|-----------|-------------------|-------------|----------|
| <b>ANTICIPATORY SET</b>    |           |                   |             |          |
| Introduced Topic           | 3         | 2                 | 1           | 0        |
| Gained Audience Attention  | 3         | 2                 | 1           | 0        |
| Activated Prior Knowledge  | 3         | 2                 | 1           | 0        |
| Established Rationale      | 3         | 2                 | 1           | 0        |
| Presentation of Objectives | 3         | 2                 | 1           | 0        |

**LESSON CONTENT**

|  |   |   |   |   |
|--|---|---|---|---|
| Knowledgeable of Content & Factual Information | 3 | 2 | 1 | 0 |
| Well-Prepared (did not read from notes)        | 3 | 2 | 1 | 0 |
| Organized & Logical                            | 3 | 2 | 1 | 0 |
| Comprehensive & Aligned with Objectives        | 3 | 2 | 1 | 0 |
| Managed Time (started & ended on time)         | 3 | 2 | 1 | 0 |
| Appropriately Used Media (PowerPoint)          | 3 | 2 | 1 | 0 |

**SUMMARY**

|  |   |   |   |   |
|--|---|---|---|---|
| Summarized Major Points & Related Back to Objectives | 3 | 2 | 1 | 0 |
| Effectiveness of Critical Thinking Activity          | 3 | 2 | 1 | 0 |

**TEACHER TACTICS**

|   |   |   |   |   |
|---|---|---|---|---|
| Effective Questioning Techniques & Engaged Learners | 3 | 2 | 1 | 0 |
| Pace & Use of Wait Time                             | 3 | 2 | 1 | 0 |
| Conveyed Enthusiasm; Appropriate Humor              | 3 | 2 | 1 | 0 |

**VERBAL & NONVERBAL BEHAVIORS**

|  |   |   |   |   |
|--|---|---|---|---|
| Eye Contact; Facial Expressions                        | 3 | 2 | 1 | 0 |
| Movement; Gestures; Rapport                            | 3 | 2 | 1 | 0 |
| Avoided Unnecessary Words ("uh, so, ah, um, ok", etc.) | 3 | 2 | 1 | 0 |

**TOTAL POINTS EARNED:** 51 / 57 (Total Points Possible)

**Site Supervisor's Signature:** [Signature]

\*NOTE: If completed by learners for feedback purposes, no signature is needed.

**List Strengths of the Presentation:**

Very knowledgeable in topic and informative presented. Thank you

**List Suggestions for Improvement:**

N.A  
Great Job!!