

**RESIDENT EDUCATOR PROGRAM**  
**Completion Form for RE Year 1 and RE Year 2 RE**  
**Consortium Coordinated by ESC Lake Erie West**

Resident Educator:		Mentor:
Area of Competency	Evidence	Date Completed
<b>Instructional Mentoring:</b> <b>Year 1 and 2</b> <i>Teaching and Learning Cycle</i>	1. Collaborative Log 2. Video Tape a Lesson 3. Data Tool	1. Number Completed ____ 2. _____ 3. _____
<b>Focused Mentoring:</b> <b>Year 1 and 2</b> <i>Professional Growth</i>	1. Self-Assessment Summary (OTES) 2. Professional Growth Plan (OTES) 3. Formal Observation from Mentor 4. Informal observation from Mentor 5. Peer Observation by RE (Use the activity template provided).	1. _____ 2. _____ 3. _____ 4. _____ 5. _____
<b>Focused Mentoring:</b> <b>Year 1</b> <i>Communication</i>	1. Use the Parent Communication Focused Mentoring Tool provided to document the activity or a district specific tool*	1. _____
<b>Focused Mentoring:</b> <b>Year 1</b> <i>Collaboration</i>	1. Use the Teacher Collaboration Focused Mentoring Tool provided to document the activity or a district specific tool*	1. _____
<b>Focused Mentoring</b> <b>Year 2</b> <i>Formative Assessment</i>	1. Use the Formative Assessment Focused Mentoring Tool provided to document the activity or a district specific tool*	1. _____
<b>Focused Mentoring</b> <b>Year 2</b> <i>Summative Assessment</i>	1. Use the Summative Assessment Focused Mentoring Tool provided to document the activity or a district specific tool*	1. _____

Optional Additional Comments:

*Signatures below represent that all requirements of the Resident Educator Program have been met.*

Signature of Resident Educator: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Mentor: \_\_\_\_\_ Date: \_\_\_\_\_

**\*Submit to Program Coordinator at year end. Attach completed Focused Mentoring Tools to this form**