**Evidence Classification and Reflection (ECR) Form**

***NOTE: This form must be included with each piece of evidence. If the evidence will be used for more than one Florida Educator Accomplished Practice plus a Standard and/or Program Outcome, the student may choose to either complete a separate ECR form for each or may choose to incorporate relevant references to each of the Florida Educator Accomplished Practices, Standards, and Outcomes designated on a single ECR form.***

**Student’s Name:** **Student ID #:**

**Date Evidence Created:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **X** | **Florida Educator Accomplished Practice****Check One or Two:** | **X** | **Program Outcome****Check One:** | **X** | **ASHA Standard****Check One:** |
|  | 1. Instructional Design & Lesson Planning
 |  | PO #1 |  | IV-B |
|  | 1. Learning Environment
 |  | PO #2 |  | IV-C  |
|  | 1. Instructional Delivery & Facilitation
 |  | PO #3 |  | IV-D |
|  | 1. Assessment
 |  | PO #4 |  | IV-E |
|  | 1. Continuous Improvement
 |  | PO #5 |  | IV-F |
|  | 1. Professional Responsibility & Ethical Conduct
 |  | PO #6 |  | IV-G |
|  |  |  | PO #7 |  | IV-H |
|  |  |  | PO #8 |  | V-A |
|  |  |  | PO #9 |  | V-B (1) |
|  |  |  | PO #10 |  | V-B (2) |
|  |  |  |  |  | V-B (3) |

**Title of Evidence:**

**Type of Evidence (Circle or Underline One):** *Performance, Product, Tests and Records, Clinical Outcomes, Testimonials, Professional Values and Commitments*

 **1. Brief Description (In one or two sentences, describe the artifact in clear and simple terms):**

 **2. Description of Context for Which Evidence Was Created:**

**3. Florida Educator Accomplished Practice, Standard, and/or Program Outcome Demonstrated: Precisely explain how the artifact is used as evidence for the Florida Educator Accomplished Practice/Standard/Outcome identified under “Types of Evidence” noted above. In this section, you must convince the evaluator that the artifact chosen is appropriate evidence for the identified Florida Educator Accomplished Practice, Standard, and/or Outcome.**

**4. Growth and Knowledge of Professional Competence: Explain the increase in knowledge and professional competence you experienced through this particular piece of evidence as a Florida Educator Accomplished Practice, Standard, and/or Outcome.**

**5. Areas of Improvement: Discuss ways in which you would improve upon this evidence if given the opportunity to develop and use it again. How would you change what you did? (Note: “Continuous Improvement” implies that there is always room to make something better. Even if you were satisfied with the results and the evidence, there are ways to improve.)**

**Evaluator’s Printed Name:**

**Evaluator’s Signature:** **Date:**

**Evaluator’s Position/Title:**