

FITNESS TO TEACH REMEDIATION PLAN

Teacher candidate's name: _____ CWID: _____

Is the concern? (Check all that apply.)

- Academic Criteria Personal & Prof Requirements
- Cultural & Social Attitudes & Behavior Emotional & Mental Abilities
- Physical Skills

Directions: Indicate below the remediation plan for this student. Include timelines and benchmarks, if appropriate.

Student signature indicates agreement with remediation plan and consent to follow the plan.

Student Signature: _____ Date: _____

Committee Chair: _____ Date: _____

Please Print

Signature _____