

CCCOE BTSA Induction Program Portfolio Reflection Letter Guidelines

Portfolios have a letter of introduction at the front. This letter serves to explain the portfolio, its contents, and the portfolio owner's growth to an outside reader. The assumption about this letter is that, after reading it, the reader can make sense of the portfolio without the benefit of a conversation with the creator of the portfolio. Please write such a letter for your portfolio.

Feel free to discuss any issues you think pertinent to this year of teaching, your experiences, your growth as a teacher, and your participation in BTSA; you may also consider the following questions:

- ❑ What was your teaching assignment this year? Were there any special considerations that affected your work?
- ❑ What experiences, hopes, and/or fears did you bring to this year of teaching?
- ❑ How did your students benefit from your Inquiry Action Plan focus?
- ❑ Based on your portfolio and its evidence, what do you believe are your teaching strengths? What areas would you like to target for future professional development?
- ❑ Reflecting back over the year, did you grow professionally in any areas not necessarily associated with your ILP and perhaps not documented by this portfolio?

Second-Year Participating Teachers

- ❑ How was this year different from last year?

CCCOE BTSA Induction Program 2011-2012 Portfolio Review Preference

Place this page in the front of your portfolio with a letter to the reader reflecting upon your year. See "Portfolio Reflection Letter Guidelines".

Please check the appropriate box or boxes:

- Please send my portfolio into the portfolio review. If you'd like to make a copy of something, feel free, but please keep me anonymous.
- Please send my portfolio into the portfolio review. I'd prefer you made no copies of any entries.

Special Notes:

How would you like your name to appear on your credential? (Please print)

First Name: _____

Middle Name: _____

Last Name: _____

Home E-mail: _____
CCTC will be sending email to this address for payment request for Clear Credential Application

Home Phone: _____

Home Address: _____

City/State/Zip: _____

District: _____ School: _____

Signature: _____

Date: _____

