|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| The WU-CIRTL Program is designed to prepare Washington University graduate students and postdoctoral appointees for future faculty positions in STEM (Science, Technology, Engineering, and Mathematics). Participants in WU-CIRTL join a learning community in which they 1) learn about effective, evidence-based pedagogical methods that can improve learning and contribute to the retention of diverse undergraduates in STEM, 2) develop strategies for implementing these methods in their current and future teaching, and 3) develop knowledge about the theory and practice of the Scholarship of Teaching and Learning (or Teaching as Research). Participation involves four levels of engagement: *Community Member, Associate, Practitioner,* and *Scholar*. Interested students and postdocs are responsible for completing requirements for each level and for using this form to document their progress. For program details, see <http://teachingcenter.wustl.edu/wucirtl>. | | | | | | | | |  |
| Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Initial: \_\_\_\_ Dept. or Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| Former Name (if name has changed during program): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_  Check one: Graduate Student \_\_\_\_ Postdoctoral Appointee \_\_\_\_ | | | | | | | | | |
| I. Advanced-Level Workshops | | | | | | | | | |
| Workshop Title  *Note: All workshops, except for* Writing a Teaching Philosophy Statement, *are in the STEM Pedagogies Workshop Series* | | | | **Foundational Topic?** | **Date Attended** | | **TC Staff Initials** | **Completed WU-CIRTL Levels:** | |
| 1 | | |  |  |  | |  | **WU-CIRTL Community Member**   * *Completed 4 STEM Pedagogies Workshops (any 4)* | |
| 2 | | |  |  |  | |  | Teaching Center Staff Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 3 | | |  |  |  | |  | Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_ | |
| 4 | | |  |  |  | |  | **WU-CIRTL** **Associate** | |
| 5 | | |  |  |  | |  | * *Completed 5 STEM Pedagogies Workshops (inc. 3 foundational)* * *Completed* Writing a Teaching Philosophy Statement *Workshop* | |
| 6 | | | Writing a Teaching Philosophy Statement |  |  | |  | Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_ | |
| II. Teaching Philosophy Statement (TPS) | | | | | | |  | |
|  | | | *At least 2 TPS drafts (initial and revised) have been reviewed and approved.*  Teaching Center Staff Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_ | | | | | |  | | |
| III. Teaching Experience  *A. Reflective Writing Exercise (Required effective January 2015)*  Signature indicates successful completion of the exercise with appropriate detail and clarity.  Teaching Center Staff Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *B. Past Teaching Experience (Required prior to 2015; Optional effective January 2015)* | | | | | | | | | | |
| Course Number and Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | **Completed WU-CIRTL Levels:** | | | |
| Semester and Year:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of Faculty or TC Staff evaluator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | **WU-CIRTL** **Practitioner** | | | |
| *Teaching Center Approval: Teaching Center signature below indicates that*  *1) The experience met the requirements of the WU-CIRTL program.*  *2) Faculty and student evaluations were reviewed by Teaching Center staff.* | | | | | | | * *Completed all Associate-level requirements* * *Documented 1 teaching experience* * *Completed the Introduction to SoTL (or Teaching-As-Research) Course* * *Completed Reflective Writing Exercise* | | | |
| Teaching Center Staff name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | Teaching Center Staff Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_  Notes: | | | | | | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_ | | | |
| IV. *Introduction to the Scholarship of Teaching and Learning (or Teaching As Research)* | | | | | | |  | | | |
| Course Completed (semester and year):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Instructor Name(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |  | | | |
| Signature (only one signature is needed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |  | | | |
| Date:\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |  | | | |
| V. Washington University STEM Teaching-As-Research (WU-STAR) Project in the Scholarship of Teaching and Learning | | | | | | | **WU-CIRTL** **Scholar** | | | |
| Implemented Scholarship of Teaching and Learning (SoTL) Project  (Semester and Year): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | * *Completed all Practitioner-level requirements* * *Implemented all elements of WU-STAR internship* | | | |
| Participated in bi-weekly research-group meetings (Semesters and Years): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | Teaching Center Staff Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Presented SoTL project (venue and date, e.g. STEM ERG mtg., 11/15/2012) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_ | | | |