**Process for Documenting an Unsatisfactory Professional Disposition**

If an issue with professional dispositions occurs in coursework, the faculty member and Program Leader are responsible for addressing and resolving the issue. Issues can be reviewed with Department Chairs as needed. Egregious concerns, including issues that jeopardize the safety of P-12 students, may result in immediate removal from the program.

If a candidate receives more than one *Assessment of Unsatisfactory Professional Dispositions*, the Department Chair must be alerted. If three unsatisfactory disposition forms are completed, the student may be removed from the program, pending a review committee’s decision.

Unsatisfactory disposition forms are discussed during regular program meetings, TEP admission reviews, and internship eligibility reviews.

Issues during field experience or internship resulting in an *Assessment of Unsatisfactory Professional Dispositions* should be administered by the appropriate UAB representative and in communication with the Director of the Office of Clinical Experiences. Field and internship concerns may result in convening the Clinical Practice Review Committee. See the *Clinical Practice Handbook* for additional information regarding the Clinical Practice Review Committee.

*What happens when an unsatisfactory professional disposition is documented?*

1. The faculty member submits the completed unsatisfactory disposition form along with any supporting documentation to the Program Leader of the candidate’s program.
2. The Program Leader and faculty member submitting the form host a conference with the candidate to review and remediate the concern. If the issue is related to field experience or internship, the Director of the Office of Clinical Experiences is included in the conference. At least two faculty members should participate in the conference. If the Program Leader is also the faculty member submitting the form, another faculty member (e.g., member of the Assessment Committee, the Program Leader from a different certification area, etc.) should participate in the conference.
   * In cases where the candidate is being recommended for immediate removal from a program, course, or field/internship placement, the Program Leader should immediately inform the Department Chair.
3. During the conference, the faculty should develop a remediation plan, including dates for check-ins and completion of expectations. All participants should sign the conference form. If necessary, a follow up meeting date is determined to check on progress and/or completion of remediation steps.
4. Following the conference, the Program Leader submits a copy of the unsatisfactory professional disposition form, the conference form, and the remediation plan to the SEHS Data Manager and the Department Chair.

*What happens when a second unsatisfactory disposition form is completed?*

All procedures for the first *Assessment of Unsatisfactory Dispositions* apply when a second form is completed. Additionally, the Program Leader should explain that should a third incident occur, the candidate may be removed from the educator preparation program in which they are enrolled.

*What happens when three unsatisfactory disposition forms are completed?*

1. The Program Leader convenes a review committee composed of appropriate faculty and staff within 10 business days of receipt of an unsatisfactory disposition form and documentation. Faculty or other parties, as well as the candidate, provide documentation regarding the assessment of unsatisfactory dispositions, prior issues, and agreement(s). The review committee examines the materials and determines the appropriate course of action.
   * A third unsatisfactory disposition generally warrants removal from the educator preparation program; however, the decision is at the discretion of the review committee, especially if the unsatisfactory disposition in this instance differs from previous issues.
2. In addition to discussing the professional disposition concern, the faculty should provide the candidate with support regarding a change of major, if necessary. Faculty may also refer the student to the Office of Student Services for support with advising.
3. Following the review committee meeting, the Program Leader submits a copy of the unsatisfactory professional disposition form, the conference form, and any other documentation to the SEHS Data Manager and the Department Chair.

*How can a decision be appealed?*

* The candidate may appeal a decision made by the review committee by following the Student Grievance Policy outlined in the *School of Education Student Handbook*.

*Where is the Assessment of Unsatisfactory Dispositions stored?*

* All unsatisfactory disposition forms will be filed in the appropriate Department Chair’s office, and in the SEHS’s data management system. Appropriate School of Education and Human Sciences leadership will maintain a tracking system to ensure that all *Assessment of Unsatisfactory Disposition* reports are documented and reviewed for continuous improvement and to ensure that all UAB education candidates receive support and remediation for success and to represent UAB well in both UAB and local school classrooms.

*Who has access to review the unsatisfactory disposition form?*

* All unsatisfactory disposition forms are reviewed with the candidate during applicable conferences to ensure that the candidate is being informed and assisted in a purposeful manner.
* The SEHS Data Manager grants permission for individual review of the *Assessment of Unprofessional Dispositions* by appropriate faculty and staff with a legitimate need to know (e.g., Program Leaders receive documents during the Teacher Education Program admission interview process.)

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Assessment of Unsatisfactory Professional Dispositions Form

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| **Candidate Information**  Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Student B0 Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Program:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date(s) of Incident:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Course/Field Experience/Internship:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Description of Incident, Including Note of the Professional Standard of Practice Not Met:** |

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| **Supporting Documentation:** Please note any relevant documentation submitted along with this form, such as emails, reports, or other evidence. |
| **Conference Details**  Date of Conference:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Participants Present:  Program Leader or Designee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Faculty Member Submitting Concern:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Candidate:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Additional Participants (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Remediation Plan: (Specify actionable steps, timelines for completion, and scheduled check-ins. Include measurable goals and expectations.)** |
| **Check-in Dates:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Completion Deadline:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **Acknowledgement of Conference**  Candidate’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_  Program Leader/Designee’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_  Faculty Member’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Date Submitted to SEHS Data Manager and Department Chair:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date Documentation Filed in SEHS Data Management System:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |