

Evidence Classification and Reflection (ECR) Form Instructions for Use

At the time a selected assignment is submitted, the SLCD student should complete the “*Evidence Classification and Reflection Form*” (ECR) and present the form to the appropriate course instructor or clinical supervisor for review and signature. The “*Evidence Classification and Reflection Form*” must be typed, computer-written, or printed neatly in black ink.

The following procedures should be followed:

The student determines how to use the artifact when organizing the portfolio presentation.

The student completes the top section, which provides identifying information.

The student marks an “X” or check to the left of the number of an Accomplished Practice, marks an “X” or check to the left of the Equivalent Program Outcome (EPO), and marks an “X” or check to the left of the Standard represented by the specific assignment to be used as evidence.

Equivalent Program Outcomes, Accomplished Practices, and Standards information related to each assignment or activity should be identified in the “Portfolio Evidence Table for SLCD Course Assignments” matrix which is included in each course syllabus.

Write the title of the evidence on the line indicated.

Circle the type of evidence being presented.

Write a brief narrative response for each of the five statements listed in the bottom portion of the form. Relate the statements to the specific Accomplished Practice, Standard, and/or Program Outcome highlighted. Use complete, grammatically correct sentences.

The instructor or supervisor reviews the ECR Form and, if the information is accurate, then signs the form.

The “*Evidence Classification and Reflection Form*” must be approved and signed by an approved faculty member or supervisor. It is recommended that the student obtain the signature soon after the course has been completed in order to avoid problems that may arise if the faculty member or supervisor is not available at a later date.

Sometimes evidence has not been developed for a specific course or clinic (e.g. attending a professional workshop or participation in a professional organization or student group). In these instances, the student is to obtain approval for the activity and obtain the

signature of a SLCD faculty member, a designated Student Portfolio Evaluator, or the Student Portfolio Manager.

Multiple Uses of a Single Artifact:

Although, in most instances, separate and distinct artifacts are used for each Accomplished Practice, there may be instances when one specific artifact is appropriate for more than one Accomplished Practice as well as for a Standard and an Equivalent Program Outcome. *Therefore, each artifact may be used a maximum of two times for the Accomplished Practices, one time for Standards, and referenced for one Equivalent Program Outcome.*

When submitting a single artifact for more than one Accomplished Practice plus a Standard, a separate “Student Evident Cover Sheet and Reflection” form maybe used for each Practice and Standard for which it is used as evidence. Another approach would be to include references to the selected Accomplished Practice(s), Standard, and Equivalent Program Outcome within the narrative context of a single ECR Form.

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 Accomplished Practice plus a Standard and/or 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 Accomplished Practices, Standards, and Outcomes designated on a single ECR form.

Student's Name: _____ Student ID #: _____

Date Evidence Created: _____

**Accomplished Practice
Check One:**

**Equivalent Program Outcome
(EPO) Check One:**

**Standard for CCC
Check One:**

<input type="checkbox"/> 1. Assessment	<input type="checkbox"/> EPO #1	<input type="checkbox"/> III-B
<input type="checkbox"/> 2. Communication	<input type="checkbox"/> EPO #2	<input type="checkbox"/> III-C
<input type="checkbox"/> 3. Continuous Improvement	<input type="checkbox"/> EPO #3	<input type="checkbox"/> III-D
<input type="checkbox"/> 4. Critical Thinking	<input type="checkbox"/> EPO #4	<input type="checkbox"/> III-E
<input type="checkbox"/> 5. Diversity	<input type="checkbox"/> EPO #5	<input type="checkbox"/> III-F
<input type="checkbox"/> 6. Ethics	<input type="checkbox"/> EPO #6	<input type="checkbox"/> III-G
<input type="checkbox"/> 7. Human Development and Learning	<input type="checkbox"/> EPO #7	<input type="checkbox"/> III-H
<input type="checkbox"/> 8. Knowledge of Subject Matter	<input type="checkbox"/> EPO #8	<input type="checkbox"/> IV-B
<input type="checkbox"/> 9. Learning Environment	<input type="checkbox"/> EPO #9	<input type="checkbox"/> IV-C
<input type="checkbox"/> 10. Planning	<input type="checkbox"/> EPO #10	<input type="checkbox"/> IV-G(1)
<input type="checkbox"/> 11. Role of Teacher		<input type="checkbox"/> IV-G(2)
<input type="checkbox"/> 12. Technology		<input type="checkbox"/> IV-G(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. **Accomplished Practice, Standard, and/or Outcome Demonstrated:** Precisely explain how the artifact is used as evidence for the 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 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 an 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: _____

{SAMPLE COMPLETED FORM}

Evidence Classification and Reflection (ECR) Form

(This form must be included with each piece of evidence. If the evidence will be used for more than one Accomplished Practice or Standard, a separate form must be completed for each of the appropriate designated Accomplished Practices or Standards.)

Student's Name: Sara Sample Student ID #: 012345678

Date Evidence Created: 09-12-03

Accomplished Practice
Check One:

Equivalent Program Outcome
(EPO) Check One:

Standard for CCC
Check One:

- | | | |
|--------------------------------------------------------------------|--------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> 1. Assessment | <input type="checkbox"/> EPO #1 | <input type="checkbox"/> III-B |
| <input type="checkbox"/> 2. Communication | <input type="checkbox"/> EPO #2 | <input type="checkbox"/> III-C |
| <input type="checkbox"/> 3. Continuous Improvement | <input checked="" type="checkbox"/> EPO #3 | <input type="checkbox"/> III-D |
| <input type="checkbox"/> 4. Critical Thinking | <input type="checkbox"/> EPO #4 | <input type="checkbox"/> III-E |
| <input type="checkbox"/> 5. Diversity | <input type="checkbox"/> EPO #5 | <input type="checkbox"/> III-F |
| <input type="checkbox"/> 6. Ethics | <input type="checkbox"/> EPO #6 | <input type="checkbox"/> III-G |
| <input type="checkbox"/> 7. Human Development and Learning | <input type="checkbox"/> EPO #7 | <input type="checkbox"/> III-H |
| <input checked="" type="checkbox"/> 8. Knowledge of Subject Matter | <input type="checkbox"/> EPO #8 | <input type="checkbox"/> IV-B |
| <input type="checkbox"/> 9. Learning Environment | <input type="checkbox"/> EPO #9 | <input type="checkbox"/> IV-C |
| <input type="checkbox"/> 10. Planning | <input type="checkbox"/> EPO #10 | <input type="checkbox"/> IV-G (1) |
| <input type="checkbox"/> 11. Role of Teacher | | <input checked="" type="checkbox"/> IV-G (2) |
| <input type="checkbox"/> 12. Technology | | <input type="checkbox"/> IV-G (3) |

Title of Evidence: Fluency Lesson
Plan/Worksheet

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

6. Brief Description: In one or two sentences, describe the artifact in clear and simple terms

Example: *This is a lesson plan, with related worksheet, I developed for a group of second grade students enrolled in fluency therapy at their elementary school.*

7. Description of Context for Which Evidence Was Created:

Example: *The lesson was developed during my public school externship. The students were working on facilitating the transfer of the feeling of fluency control from the therapy resource room into the classroom.*

(ECR Form, continued on next page...)

- 8. Accomplished Practice or Standard Demonstrated: Precisely explain how the artifact is used as evidence for the Accomplished Practice or Standard 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 Accomplished Practice, Standard, or Outcome.**

Example: *The fluency lesson plan and worksheet, which I designed, incorporates information from the students’ Language Arts vocabulary list into the fluency treatment session. Using their classroom vocabulary enables students to link what is learned in therapy to what is learned in their classroom curriculum. Not only does the lesson become more meaningful to the students, but using school vocabulary provides for additional practice of fluency control when the children use the target words in the classroom. The intervention strategies demonstrate my knowledge of fluency and my ability to develop and implement appropriate intervention strategies for children who stutter.*

- 9. Growth and Knowledge of Professional Competence: Explain the increase in knowledge and professional competence you experienced through this particular piece of evidence as an Accomplished Practice or Standard.**

Example: *Before I began developing this product, I was unaware of the importance and impact of using curriculum-based materials to facilitate the transfer of the feeling of fluency control. I was also unfamiliar with the elementary school Language Arts curriculum. This activity enables me to apply clinical skills to the real world school setting. The activity taught me to expand my role as a school-based speech-language pathologist.*

- 10. 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 results and the evidence, there are ways to improve.)**

Example: *When I use this activity again, I will ask the children to take a more active part in selecting the vocabulary words. Providing the students with more opportunities for taking responsibility for identifying the words they practice will help the students to become more responsible for and more involved in the therapy process.*

Evaluator’s Printed Name: _____

Evaluator’s Signature: _____ **Date:** _____

Evaluator’s Position/Title: _____