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CLUSTER PROGRAM.

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A STUDY OF CRITERIA FOR SELECTION OF CLINICAL CONSULTANTS  
IN THE MICHIGAN STATE UNIVERSITY CLUSTER PROGRAM

By

Julius Myers, Jr.

A DISSERTATION

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## ABSTRACT

### A STUDY OF CRITERIA FOR SELECTION OF CLINICAL CONSULTANTS IN THE MICHIGAN STATE UNIVERSITY CLUSTER PROGRAM

By

Julius Myers, Jr.

The major purpose of this investigation was to study the existing criteria now used for selecting clinical consultants to determine whether student teachers, supervising teachers, public school principals, center directors and clinical consultants agree upon commonly accepted criteria for selection of clinical consultants. A second purpose was to determine to what degree these key persons in the cluster program regard a basic list of selection criteria for clinical consultants to be important. The third purpose was to utilize the data obtained in this study to develop a list of criteria that can be used as a guide by institutions and teacher education centers for the selection of clinical consultants.

The normative survey and evaluation method of research were used in this study. After developing a questionnaire from the literature and from pretesting the instrument with persons in the cluster program, 30 selection criteria were selected to be included in the survey. The instrument was mailed to 319 subjects who participated in the cluster program during the fall term of 1972. A 72 per cent return

was obtained with 231 of the respondents returning usable questionnaires.

The data obtained were then quantified and a F-test of the multivariate analysis of variance was conducted at the .05 level of significance.

The following twenty-six criteria were identified, and are suggested as a basic guide for the selection of clinical consultants.

Possess the level of academic preparation required by state certification laws.

Have completed at least three years of successful teaching experience.

Possess a bachelor's degree.

Participate in the program willingly and look upon supervising the growth of student teachers as a contribution to the profession.

Demonstrate or has demonstrated ethical principles in guiding his actions.

Be recommended by his or her administrators, co-workers and by the student teaching staff of the teacher education institution.

Possess the ability to diagnose, analyze, and evaluate the behavior of children, student teachers, and himself.

Demonstrate that his or her work is the result of organized planning based on well defined objectives.

Reflect a positive professional attitude and a real liking and respect for teaching.

Be able to establish a feeling of security on the part of student teachers by clarifying his responsibilities throughout the student teaching period.

Be able to demonstrate and understand the basic principles of effective teaching and learning.

Be able to exhibit a cooperative attitude in relationships with other members of the staff.

Have worked with student teachers and acquired a basic understanding of the responsibilities of a supervising teacher.

Be enthusiastic regarding the role of clinical consultant.

Be able to consider new and different teaching techniques in an open-minded manner.

Be able to help student teachers to develop understanding of their strengths and weaknesses and foster in them a healthy self-concept.

Be able to utilize conferences with student teachers as a form of teaching and learning through discussion.

Be capable of working with the student teachers and building staff in developing individual participatory schedules based on diagnosed needs of the student teachers in the building.

Shows willingness in providing classroom supervision of student teachers in the building in cooperation with regular classroom teachers.

Be able to help the student teachers in the building on such matters as lesson planning, discipline, and human relationships, which are called for by the objectives of the courses they teach.

Be capable of taking corrective measures which will improve difficult situations.

Be able to demonstrate an acquaintance with the literature of his or her professional field.

Have developed an appreciation for people who are different in culture, racial, religious, economic, and national background, and is willing to accord them full equality of opportunity.

Set positive example for student teachers in personal appearance and hygiene, grooming, speech, and habits.

Be able to utilize recent developments and trends in the teaching profession.

Have an understanding of the program, personnel, and problems of cooperating schools, especially at the level where he or she is the clinical consultant.

Within the limitations of this investigation, the following conclusions were supported:

1. Even with a pre-determined list of criteria for the selection of clinical consultants, cluster program personnel did not totally agree as to their importance.
2. Among the respondents in the cluster program of student teaching, there was a nucleus of criteria which were agreed upon as important by most of the population.
3. There is an insufficient number of clinical consultants available for vigorous application of any but the basic selection criteria.

## ACKNOWLEDGMENTS

My sincere appreciation and gratitude are extended to the members of my committee, Drs. Banks Bradley, Joseph H. McMillan and Donald Nickerson, for their assistance, and especially to the committee chairman, George Myers, for three years of unfailing support, encouragement and friendship.

Special appreciation is extended to members of the Student Teaching Office staff for their cooperation in the study and to the many student teachers, public school principals, supervising teachers, clinical consultants and center directors who gave freely of their time to make this study possible.

I am particularly appreciative of my wife Lena for her love, patience and sustained encouragement over the several years of the program. To my son Stanley, who will come to understand this educational endeavor, I extend a special thanks for his patience and understanding.



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## CHAPTER I

### NATURE OF THE STUDY

#### INTRODUCTION TO THE STUDY

Teacher education programs face more challenges today than ever before. The need for sheer numbers has ground to a halt. Colleges and universities cannot afford to continue to produce teachers who are out of touch with the real world of the school.<sup>1</sup>

In an effort to further student teachers' experiences within the real world of schools, programs have been designed that stress visiting social agencies and community organizations, spending time in students' homes, and involvement in other community activities, in addition to the conventional in-school student teaching activities. The Cluster Program of Student Teaching at Michigan State University emphasizes these activities.

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<sup>1</sup>Joseph Robinson, "A Field Experience Program in Teacher Education," Kappa Delta Pi Record, Vol. 8 (February 1972), p. 87.

### NEED FOR THE STUDY

Because there is a continuing need for clinical cluster consultants, it becomes important to develop useful criteria for selecting those teachers in the public schools who will be most competent as clinical consultants to serve in cluster programs.

The quality of our clinical consultants should be of vital concern, not just the quality of their academic classroom preparation, but of their total impact on all these persons in teacher preparation programs.

Merrill states:

. . . student teaching programs and even internships are too often staffed by a variety of temporary, sometimes uncommitted, often inappropriately prepared, but conveniently available persons. No institution deliberately staffs in this manner; in practice, however, the evidence is sometimes incriminating even for those institutions which are supposedly particular about employing staff.<sup>2</sup>

No research is available regarding identification of criteria for selecting clinical consultants. The success of the Cluster Program for Student Teaching depends upon the clinical consultant, who is in a position to do a great deal for student teachers. It is essential to select someone who will enhance the student teachers' experiences. To be more precise, at the present time there is no single list of criteria for selection of the clinical

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<sup>2</sup>Edward C. Merrill, Jr., Professional Student Teaching Programs (Danville, Ill.: The Interstate Printers and Publishers, Inc., 1967), p. 100.

consultant to be found in the literature of teacher education.

### STATEMENT OF PURPOSE

The purposes of this study are to:

1. Investigate the existing criteria now used for selecting clinical consultants and to determine whether student teachers, supervising teachers, public school principals, clinical consultants and center directors agree upon commonly accepted criteria for selection of clinical consultants.
2. To determine to what degree these key persons in the cluster program regard a basic list of selection criteria for clinical consultants to be important.
3. To utilize the data obtained in this study to develop a list of criteria that can be used as a guide by institutions and teacher education centers for the selection of clinical consultants.

### HYPOTHESES

The hypotheses to be tested in this study are as follows:

1. There will be no commonly accepted criteria for selection of clinical consultants which are recognized by student teachers, supervising teachers, public school principals, center directors and clinical consultants.
2. The elementary school cluster program personnel will not identify a different list of selection criteria than will the secondary school cluster program personnel.

As was pointed out earlier, there is no single list of criteria for selecting clinical consultants to be



found in the professional literature on student teaching. However, the absence of an accepted list of criteria should not lead to a refusal to accept some concurrence with regard to criteria for selection of clinical consultants.

#### UNDERLYING ASSUMPTIONS OF THE STUDY

The following assumptions were made in the formulation and conduct of this study:

1. That an adequate student teaching experience is more likely to result when certain general criteria are employed in the selection of clinical consultants.
2. That the clinical consultant must be carefully selected since not all persons possess the qualities and level of competence necessary for serving in this capacity.
3. That the criteria used for the selection of clinical consultants will apply to all programs where clinical consultants of student teachers are involved.
4. That a clinical consultant requires special qualities and competencies.
5. That student teachers, supervising teachers, principals, center directors and clinical consultants of the cluster program have responsibilities to determine the personal and professional competencies that clinical consultants should possess.
6. That since the basic responsibility for the administration of quality student teaching programs depends upon the total cluster program personnel, the selection of clinical consultants represents a necessary element in the development of a total staff in the cluster program of student teaching.

7. That this study is not intended, nor should it be interpreted, as an evaluation of any specific student teaching program, student teaching staff or institution.

#### LIMITATIONS OF THE STUDY

It should be noted that since an exploratory study of this nature cannot be all-encompassing, limitations of the study are as follows:

1. This study was limited to those Michigan State University students who completed their student teaching in the fall term, 1972.
2. This study was limited to the cluster program of student teaching as utilized at Michigan State University.
3. This study was confined to those public schools where there were cluster programs.
4. This study involved only those principals, supervising teachers, center directors and clinical consultants of the cluster program.
5. This study was limited to the student teaching phase of teacher education.
6. This study was a normative survey, with the participants selected within the normal limitations of the questionnaire technique.

#### DEFINITION OF TERMS

Some of the terms used have meanings which vary among the different fields of education. The following explanations of terms give the meaning applied to each term as it has been used in this study.

### Principal

The principal is the building administrator who is responsible for educational leadership, the supervision of the operation, and management of the school facility.<sup>3</sup>

### Supervising Teacher

A full-time experienced teacher employed by a school district, who is selected to work with the student teacher in the classroom. He shares responsibility for the supervision and guidance of the student teacher's experience in the classroom and in related school activities. Other terms that are used to describe this teacher-function are: cooperating teacher, base teacher, sponsoring teacher, critic teacher, and directing teacher.

### Student Teacher

A prospective teacher who is acquiring practical teaching experience and skill under the guidance of a supervising teacher or qualified person.<sup>4</sup>

### Center Director

A member of the university staff who has

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<sup>3</sup>Enrolled House Bill No. 4195, Act No. 246, State of Michigan, 75th Legislature, 1970.

<sup>4</sup>Carter V. Good, Dictionary of Education (New York: McGraw-Hill, 1959), p. 530.

responsibility to visit, observe, assist in evaluation, and conduct seminars with student teachers. He is also responsible for in-service training for both clinical consultants and supervising teachers as this relates to the supervision of student teaching activities. It is through him that feedback information is supplied to the local school system and the university to modify and improve the program.<sup>5</sup>

#### Cluster Consultant or Clinical Consultant

This new position in the cluster program identifies a competent person of the cooperating school staff who is assigned for a portion of the school day as a building consultant to the school teachers. The college, in some instances, reimburses the school district for the time the cluster consultant devotes to the student teaching program. This person may be regarded as a member of the college or university staff in addition to being a member of the teaching staff of the local school district. The individual assumes direct responsibility for the experiences of the student teachers and supervising teachers in his building.

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<sup>5</sup>Calvin C. Anderson, "Secondary Education Residency in Lansing: A Model Project Developed Cooperatively by the Lansing School District and Michigan State University to Improve the Preparation of Teachers," Unpublished Doctoral Dissertation, Michigan State University, 1972.

## Cluster Program of Student Teaching

A program devised at Michigan State University as a model that would broaden the learning experiences of the student teachers. Planned student contact with several teaching models, a highly individualized experience, contact with a variety of school-community activities, and greater involvement of the public school cooperating staff are primary elements of this program.<sup>6</sup>

### ORGANIZATION OF THE STUDY

Chapter I describes the general nature of the study. The need for the study, statement of purpose, hypotheses, underlying assumptions, limitations, and operational definitions are stated.

In Chapter II, pertinent literature and related studies are discussed, while in Chapter III the research methodology, instrumentation and techniques used to collect the data to test the hypotheses will be treated.

In Chapter IV, the research findings are presented and analyzed.

A summary of the findings with conclusions and implications are presented in Chapter V.

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<sup>6</sup>Student Teaching Office, "Student Teaching Year End Report, 1967-68," East Lansing: Michigan State University, 1968 (Mimeographed).

## CHAPTER II

### REVIEW OF THE LITERATURE AND RELATED RESEARCH

#### INTRODUCTION

The review of literature focused upon four areas, which were (1) the Cluster Program of Student Teaching, (2) selected research studies related to the cluster program, (3) the roles of persons in related programs, and (4) selected studies related to identification of selection criteria. This review was designed to provide (1) a frame of reference for this study, (2) selected descriptions of related research findings, and (3) a discussion of the research methods used in this study.

#### THE CLUSTER PROGRAM OF STUDENT TEACHING

The SERL Project created the basic design for the "cluster program" at Michigan State University. The purpose was to identify and develop a pattern for the clinical preparation teachers who could organize and manage instruction, with emphasis on unique learning needs of a wide variety of youngsters. The project was a cooperative venture by the Instructional Division of the Lansing School District and the School of Teacher Education at

Michigan State University. It was initially designed to prepare teachers for junior high schools, but was later expanded to include student teachers at the senior high and elementary levels.<sup>1</sup>

Jackson<sup>2</sup> states in his introduction to the Cluster Consultant Monograph: "much has been written and spoken advocating individual attention but often student teachers are put through a lock-step program with little thought to their individual needs."

Recognizing this need in teacher education, college personnel and public school representatives have been working together to develop improved programs of field experiences for student teachers.

The deans and directors of Michigan teacher education institutions considered four main principles paramount in designing a model student teaching program. They were:

1. The program for student teachers should provide great flexibility so that strengths and weaknesses of the individual student will determine the specific programs each will follow.
2. The student teacher should be involved in a program which is designed to provide contact with several teachers and various teaching styles.

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<sup>1</sup>Lansing School District and Michigan State University Student Teaching Office, SERL Project: A Project to Improve the Preparation of Teachers, 1967.

<sup>2</sup>Charles Jackson, "Introduction," Cluster Consultant Monograph (East Lansing: Student Teaching Office, Michigan State University, Fall 1972), pp. 1-2.

3. The program should be structured to provide many other kinds of school experiences for the student teacher in addition to classroom teaching.
4. Effective means should be developed to bring practicing teachers and teacher preparation institutions into a true partnership in the design and implementation of the teacher education program.<sup>3</sup>

With these objectives in mind, the staff members of the Michigan State University Student Teaching Program and public school teachers, developed from the SERL project in the mid 1960's into the maturing cluster program of the 1970's.

The student teaching cluster program is now reaching its potential because teacher educators at Michigan State University are really looking upon the entire school and the community in which it operates as a laboratory for learning. Teacher educators are utilizing the vast resources available within the school and within the community, to build a program for each individual student teacher in the cluster program. Recognizing that each brings unique strengths and weaknesses, the teacher educators are building a program that is tailor-made for each individual student.<sup>4</sup>

During the term preceding student teaching the students in the SERL Project participated in a series of non-credit orientation sessions. They were required to have completed all of their pre-student teaching

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<sup>3</sup>Lee W. Dean and Henry Kennedy, "Position Paper on Student Teaching Programs Developed by Deans and Directors of Michigan Education Institutions," Teacher Education in Transition, ed. by Howard E. Bosley, I (Baltimore: Multi-State Teacher Education Project, 1969), p. 165.

<sup>4</sup>Lee W. Dean, Excerpt from Speech Presented at the Intern and Clinical Consultant Conference (East Lansing: School of Teacher Education, Michigan State University, May 25, 1972), p. 3.



professional education courses.

Students spent full time in student teaching and were assigned to school buildings in clusters of ten or twelve students per building. The school and community served, was considered a learning laboratory in which the student teacher studied the problems of teaching and gained experience in solving those problems.<sup>5</sup>

The student teacher was assigned to a schedule of activities designed to foster the greatest possible learning during the student teaching period. The individualized schedule for each student teacher was examined periodically, and revised as needed to meet the needs of that student teacher. Assignment to at least one or two teachers and classes were continued for several weeks in order to provide an extended experience with the same group of students and permit the development of long range units of instruction.

There was a planned sequence of activities in which student teachers were engaged as they progressed toward the more complex problems of instruction. The student teacher was also in contact with several teachers and classes to observe such things as: (a) instructional styles, (b) more difficult methods of instruction, (c) lecture, (d) discussion, (e) unit teaching, (f) problem solving, and (g) inquiry learning. He moved through

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<sup>5</sup>Lee W. Dean, "A Student Teaching Program for the 1970's," (Mimeographed Speech) (East Lansing: School of Teacher Education, Michigan State University, December 29, 1969), p. 2.

these experiences as rapidly as he was capable of moving.

In addition, the student teacher was engaged in a program designed especially for him to learn about the many other aspects of a teacher's job outside the formal classroom setting. Such experiences as the following were included: (a) working with small groups or individuals in remedial tutoring situations, (b) visiting homes of students and learning about community activities, (c) learning about the administration of a school as viewed by the principal, attendance officer, custodian or grounds keeper, (d) learning about and working with social agencies influential in the community, and (e) becoming familiar with the special services of the school (guidance, remedial reading, school nurse, library, audio-visual aids and the like).<sup>6</sup>

To guide the learning experiences of student teachers in this educational laboratory, an outstanding teacher from the instructional staff of the school was selected jointly by the local school district, and the Michigan State University center director. This teacher was released part-time by the school district (this time was sometimes purchased by the university) to serve as a clinical consultant who helped plan for the optimum utilization of the resources of the school in developing an individualized professional experience program for

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<sup>6</sup>Ibid.

each student teacher based upon his strengths and weaknesses.<sup>7</sup>

The clinical consultant was responsible for the student teachers assigned to his building and worked with the building staff to provide a variety of experiences for the student teachers and to insure that the student teachers made a positive contribution to the school program. He was also responsible to the Michigan State University Student Teaching Center Director for all activities involving student teachers. His specific responsibilities were as follows:

- (a) Providing leadership to, and working with, the student teachers and the building staff in developing individual participatory schedules based on the diagnosed needs of the student teachers in the building. This will include arranging with teachers in the building for classroom teaching experiences for student teachers on a block-time basis or for extended periods for part of the school day.
- (b) Providing classroom supervision of student teachers in the building in cooperation with the regular classroom teachers.
- (c) Providing instruction to student teachers in the building on such matters as lesson planning, discipline, and relationship, which are called for by the course objectives. This instruction may be provided in conference group sessions in which all the student teachers in the building are involved.
- (d) Providing leadership in the counseling and evaluation of student teachers as they progress through

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<sup>7</sup>"Agreement with Schools for Clinical Cluster for Student Teaching" (East Lansing: Michigan State University, Student Teaching Office, 1970), p. 1.

the experiences and providing to them the results of the evaluation conferences.

- (e) Identifying those problems or questions in which the building staff might be involved with the university through its student teaching coordinator, and arranging sessions in which these questions can be dealt with on a formal basis.
- (f) Assisting student teachers in identifying social and philosophical issues in the community as the basis for considering these topics in ED 450 ("School and Society").
- (g) Providing for faculty involvement in the evaluation of the program.<sup>8</sup>

Cragun, et al.,<sup>9</sup> indicated that in addition to the responsibilities agreed upon by Michigan State University and the school district, the clinical consultant was involved in understanding the roles of the (1) central administration, (2) building principal, (3) students, (4) parents, (5) professional teacher organizations, (6) youth-serving agencies, and (7) center director or university coordinator in relation to the program.

In providing the experiences that gave student teachers a realistic assessment of their skills, the clinical consultant was (8) interviewing, (9) assigning, (10) having group and individual instruction,

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<sup>8</sup>"Responsibilities in Clinical Cluster Program: Supplement to Agreement with School for Clinical Clusters" (East Lansing: Michigan State University, Student Teaching Office, 1970), pp. 1-2.

<sup>9</sup>John Cragun, et al., Cluster Consultant Monograph, coordinated by Arden Moon (East Lansing: Michigan State University, Student Teaching Office, Fall 1972), pp. 5-60.

(11) providing orientation, (12) scheduling, (13) getting involved in the community, (14) evaluating and recommending placement, and (15) doing research and experimentation.

He was also giving direction and helping to develop specific procedures and techniques with the student teachers in (16) identifying the skills to be learned, (17) stating instructional objectives, (18) working in simulation, (19) doing some behavior modification, (20) gathering and using feedback, (21) making career choices, (22) self-evaluation through conferences, (23) forming a philosophy of education, and (24) getting involved in in-service education.

#### Research Related to the Cluster Program

Jackson<sup>10</sup> studied selected student teaching experiences reported by Michigan State University cluster program and conventional program student teachers. He utilized a questionnaire developed by Dr. Irvin J. Shutsy and modified it from pretesting the instrument with professionals in the field of teacher education, and one hundred student teaching experiences. The t-test procedure was used in analyzing the data.

Jackson concluded that the cluster program student

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<sup>10</sup>Charles L. Jackson, "A Study of Selected Student Teaching Experiences Reported by Michigan State University Cluster Program and Conventional Program Student Teachers," Unpublished Dissertation, Michigan State University, 1971.

teachers had experienced more of the selected student teaching experiences than had the conventional program student teachers. He also reported that the cluster program student teachers reported their experiences were more valuable to them than the conventional program student teachers. And it was finally recommended that more of these experiences were included in the cluster program than in the conventional program.

Bloom<sup>11</sup> explored the role expectation for clinical consultants as viewed by student teachers and clinical consultants in the Michigan State University Cluster Student Teaching Program. The study explored preference for, and perceived frequency of occurrence of, selected clinical consultant tasks. The eight types of tasks used were: (a) community involvement, (b) variety of experiences within the school, (c) management, (d) conditions of learning, planning for learning, (e) evaluation of learning, (f) analyzing teaching behavior, and (g) supportive behavior. Bloom's study also dealt with student teachers' and clinical consultants' preference for and perceived method of operation. The selected clinical consultants' methods of operation were theoretical or practical, student teacher or clinical consultant

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<sup>11</sup>Darrell A. Bloom, "Role Expectations for Clinical Consultants as Viewed by Student Teachers and Clinical Consultants in the Michigan State University Cluster Student Teaching Program," Unpublished Doctoral Dissertation, Michigan State University, 1971.

initiative, and directive or non-directive. Bloom developed the "clinical consultant inventory" from the categories listed above.

Bloom concluded that the eight measures of tasks and methods of operation as measured by the Clinical Consultant Inventory revealed no significant difference between the student teacher and clinical consultant perceptions of the role of the clinical consultant in the Michigan State University Cluster Program.

#### ROLES OF PERSONS IN RELATED PROGRAMS

The Tutorial and Clinical Program in Teacher Education grew out of a faculty committee appointed by the Dean of the School of Education in 1961, to develop plans for the improvement of the facilities of Northwestern University. This committee recommended the creation of an experimental program planned by the faculties of the School of Education and College of Arts and Sciences with the aid and counsel of select teachers and administrators from the public schools. This planning was based on three fundamental agreements.

1. That the program meet the general education requirements as established by the university faculty;
2. That all academic majors for secondary teachers be planned jointly with the appropriate academic departments in the College of Arts and Sciences; and
3. That all instruction in the art of teaching be given through tutorials and related clinical

experiences rather than through formal course work in professional education.<sup>12</sup>

The basic elements of the program considered by the committee were academic majors for elementary and secondary teachers, content of the tutorials, and various types of related laboratory or clinical experiences. The final report contained the following guidelines:

1. All students recommended for certification as teachers through Northwestern University will meet the general education requirements common to all undergraduates in the university.
2. All students will take work in the social sciences beyond the general education requirements, since the practicing teachers are considered to be practicing social scientists. Such programs in the social sciences should be jointly developed by appropriate faculty members from the School of Education and the College of Arts and Sciences.
3. Secondary teachers will be certified in only one teaching field.
4. Elementary teachers will take a minimum of nine courses (36 quarter-hours) in each of two disciplines which are commonly taught in the elementary school in addition to the general education requirements of the university, and appropriate work in subject matter areas commonly taught by elementary teachers.
5. Instruction in professional education will be given through tutorials and parallel laboratory experiences under the direction of tutorial professors and clinical professors. The clinical professors are master teachers employed by cooperating public school districts and are members of the faculty of the School of Education on a half-time assignment.

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<sup>12</sup>William R. Hazard, The Tutorial and Clinical Program of Teacher Education (Evanston, Ill.: Northwestern University Press, 1967), p. 4.



6. The program will be subject to constant evaluation, modification, and revision.
7. Such continuous study and evaluation shall be the responsibility of the tutorial professors in the consultation with appropriate faculty members from the College of Arts and Sciences and public schools.<sup>13</sup>

### Role of the Tutorial Professors

The tutorial professors direct the total preparation of the students that become involved in the Tutorial Program. They work directly with ten to twelve students, alone with the clinical professors and supervising teachers in the cooperating public schools. The tutorial professors and students try to relate the work in the academic area to the realities of classroom teaching. These two factors involve the analysis of the pupils, the teaching process, the operational patterns of school at all levels, and the environmental forces that shape teaching practices. In the implication of these factors are curriculum, evaluation, planning, teaching methods, and research skills, and a thorough understanding of the means and ends of education.

The tutorial professors meet with the students on a one-to-one basis or in groups; have orientation and academic advisement; use discussions, lectures, field trips, reports, panel discussions, or guest speakers. They must be familiar at each class level with the

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<sup>13</sup>Ibid., pp. 4-5.

academic, tutorial, and clinical background of their students and the nature of subsequent work in the program. This means that the tutorial professors need competencies in specific teaching and research areas in addition to skill in tutorial teaching.<sup>14</sup>

### Role of the Clinical Professor

James B. Conant recommended the appointment of full-time clinical professors with recent teaching experiences in the schools.<sup>15</sup> The Northwestern scheme attempts to maintain current practitioner skills through dual appointment to both the college and school faculties.

Clinical professors work directly with students in the tutorial-clinical program. Clinical assignment in elementary and secondary schools, community agencies, and a variety of teaching-learning settings are arranged for the students by the clinical professors. The student teachers undertake teaching aid, tutorial, and other participant-observer roles under the immediate direction of classroom teachers and administrators in the cooperating schools. The clinical professors supervise these clinical assignments, conduct the regular seminars with the student teachers, and maintain close contact with the cooperating

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<sup>14</sup>Ibid., pp. 15-16.

<sup>15</sup>James B. Conant, The Education of American Teachers (New York: McGraw-Hill, 1963), pp. 140-45.

teachers and administrators.<sup>16</sup>

### Role of the Intern Consultant

The Elementary Intern Program at Michigan State University began in 1959 in an attempt to help students from community colleges meet certification requirements. The Michigan State Intern Program is now operating in eight regional centers. Introduction into teaching is considered to be easier in the intern program than in the traditional program. While the students are in the program the responsibility for supervision rests with the intern consultant.

The consultants spend time with the interns in observations, planning, demonstration teaching, and conferences. Each intern consultant supervises five interns for the entire school year and has no other classroom responsibilities. Occasional visits are made by the resident coordinator and his assistants. The coordinator also conducts frequent in-service training sessions for the intern consultants.<sup>17</sup>

Fitch investigated role expectation for intern

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<sup>16</sup>William R. Hazard and B. H. Chandler, "The Clinical Professor in Teacher Education," Phi Delta Kappan (February 1972), p. 370.

<sup>17</sup>Marvin A. Henry, "Summary of Representative Internship Programs," Internship in Teacher Education, ed. by Horton C. Southworth (Washington, D. C.: The Association for Student Teaching, Forty-Seventh Yearbook, 1968), p. 179.

consultants as viewed by the intern teachers and intern consultants.<sup>18</sup> Role expectations were defined in terms of behaviors expected of the consultant's job rather than in terms of observed behavior. He developed an instrument that measured preference for, and perceived frequency of, selected intern consultant tasks (planning for learning, evaluation of learning, etc.). Another aspect of the study involved preference for, and perceived actual intern consultant method of operation. This phase was designed to determine the degree of (1) theoretical or practical, (2) consultant or intern initiative, and (3) directive or non-directive method of operation used by the intern consultant in actual practice.

Fitch concluded that intern consultants expressed a higher preference for and greater frequency of occurrence of each selected consultant task than elementary intern teachers. Consultants perceived interns receiving greater assistance with greater frequency than interns. Consultants and interns preferred practicalness in intern consultant method of operation. Consultants perceived their method of operation as theoretically based while interns perceived consultant assistance as practical. Both groups preferred and perceived consultants as allowing interns to

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<sup>18</sup>Thomas C. Fitch, "Role Expectation for Intern Consultants: View of Intern Teachers and Intern Consultants in Michigan State University Elementary Intern Program," Unpublished Doctoral Dissertation, Michigan State University, 1969.

initiate action toward the solution of problems and encouraging interns to initiate in problem situations. Consultants and interns preferred directiveness in clinical consultant method of operation, but perceived consultants as being indirective. Interns and consultants wanted consultants to assist interns in planning, but both groups perceived interns as receiving the least attention with planning than with any other selected consultant task. The analysis of the teaching task was also highly preferred but was perceived to occur with little frequency.

#### REVIEW OF SELECTED STUDIES BASED ON SELECTION CRITERIA

Many studies have been done to determine the criteria for selecting personnel to work with student teachers. Many of these studies have been concerned with the selection of teachers or supervising teachers.

In an investigation of 150 Ohio school administrators, two lists of desirable teachers' characteristics were developed. The study indicated that school superintendents consistently place a high value upon ability to influence, work with, and be liked by people. Poise and grooming rated ninth and twelfth in one list. One list of desirable characteristics for teachers, ranked in order of importance, is as follows:

1. The teacher apparently likes children.

2. The teacher has demonstrated ability to work with people.
3. The teacher inspires confidence.
4. The teacher expresses him or herself well.
5. The teacher is pleasant and basically happy.
6. The teacher is well poised.<sup>19</sup>

Later in the same study a question was asked concerning factors that help discriminate between potentially good and poor teachers. The responses, again ranked in order of importance, were as follows:

1. Emotional and mental stability.
2. Ability to work with people.
3. Confidential statements about the person.
4. Past teaching experiences.
5. Knowledge in the field of specialization.
6. Previous principal report.
7. Student teaching success.
8. Confidence inspired by the candidate.
9. Poise of candidate.
10. Academic grades.
11. Oral expression ability of the candidate.
12. Grooming.
13. Extracurricular activity.
14. Work experience.

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<sup>19</sup>Neil R. Gibbons, "How Superintendents Select Teachers," Ohio Schools, Vol. 40 (April 1962), p. 44.

# 15. Cultural experiences.<sup>20</sup>

Rogers<sup>21</sup> found five criteria associated with supervising teacher effectiveness, while David G. Kelley<sup>22</sup> suggested forty-three criteria for selection of supervising teachers.

Youstra<sup>23</sup> investigated criteria for selection of college supervisors of student teachers as perceived by student teaching administrators of selected institutions of the Southeastern Regional Association for Student Teaching.

Youstra concluded that there was an absence of established criteria or job specifications for the position of college supervisor of student teaching. The majority of the respondents considered twenty of the twenty-eight criteria "basic, necessary requirements" for college supervisors.

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<sup>20</sup>Ibid.

<sup>21</sup>Charles Harman Rogers, "Factors Associated with Supervising Teacher Effectiveness," Unpublished Ed.D. Dissertation, Cornell University, 1964.

<sup>22</sup>David George Kelley, "An Exploratory Study of the Criteria Used by College Supervisors of Student Teachers and Elementary School Principals in the Selection or Recommendation of Cooperating Teachers," Unpublished Ed.D. Dissertation, Columbia University, 1965.

<sup>23</sup>George David Youstra, "A Study of Criteria for Selection of College Supervisors of Student Teachers as Perceived by Student Teaching Administrators of Selected Institutions of the Southeastern Regional Association for Student Teaching," Unpublished Ph.D. Dissertation, Michigan State University, 1968.

Although there was some disagreement between college personnel and the public school teachers over the importance of the selection criteria, the administrators agreed that a list of criteria would be helpful when attempting to select new college supervisors of student teaching.

Johnson<sup>24</sup> studied the criteria used by administrators of "Big Ten" universities to select supervising teachers in secondary schools. He found agreement on five of eighteen selected criteria, while a majority of the other items were agreed upon by seven of the ten administrators. The instrument used in this study was adapted from the ones developed by Johnson and Youstra.

### SUMMARY

In summary, the preceding discussion of the related literature tried to establish some background for the study by the following: (1) focusing on the development of the cluster program of student teaching as it relates to the clinical consultant role and responsibilities, (2) calling attention to two research studies on the cluster program, (3) describing the roles of

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<sup>24</sup>Manley F. Johnson, "A Study of Criteria for Selection of Supervising Teachers in Secondary Schools as Perceived by Student Teaching Administrators," Unpublished Ed.D. Dissertation, Michigan State University, 1968.



tutorial and clinical professors, and (4) discussing the intern consultant's role in internship programs, and finally, (5) concentrating on the selected research of selection criteria cited by teacher educators of student teaching.

## CHAPTER III

### PROCEDURES UTILIZED IN THE STUDY

#### INTRODUCTION

The purposes of this study were: (1) to investigate the existing criteria now used for selecting clinical consultants and to determine whether student teachers, supervising teachers, public school principals, center directors and clinical consultants agree upon commonly accepted criteria for selection of clinical consultants; (2) to determine to what degree these key persons in the cluster program regard a basic list of selection criteria for clinical consultants to be important; and (3) to utilize the data obtained in this study to develop a list of criteria that can be used as a guide by institutions and teacher education centers.

The hypotheses of the study were (1) that there will be no commonly accepted criteria for selection of clinical consultants which are recognized by student teachers, supervising teachers, public school principals, center directors and clinical consultants; and (2) the elementary school cluster program personnel will not identify

a different list of selection criteria than will the secondary school cluster program personnel.

#### SOURCE OF DATA

Student teachers, public school principals, supervising teachers, center directors and clinical consultants in the Michigan State University Cluster Program of Student Teaching were selected as the subjects of this study. They were selected because: (1) it was assumed that they shared a common concern for the improvement of student teaching; (2) they share a mutual concern for the selection of competent clinical consultants; (3) they had been involved for almost an entire quarter (11 weeks, full-time) with the clinical program; and (4) they were accessible and cooperative in conducting the study.

The names of the subjects selected to participate in this study were obtained from the "Fall Term, 1972, Report of Student Teachers Placed."<sup>1</sup> Permission to use this report was obtained from the Director of Student Teaching, Dr. Henry W. Kennedy. This report contained the names of all those students assigned to student teach in the fall term of 1972, the center to which they were assigned, the public school building in which they taught,

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<sup>1</sup>"Fall Term, 1972, Report of Student Teachers Placed" (East Lansing: Michigan State University, 1972), Mimeographed.

and the name of the cluster consultant and supervising teacher or base teacher.

Involved in the cluster program were 44 principals, 42 clinical consultants and 13 center directors. These individuals comprised the total number of respondents eligible for the study and thus were not a sample.

The student teachers selected for the sample represented 39 per cent of the total population of the cluster program student teachers in the fall term of 1972. Three student teachers were randomly selected from each cluster. Seventy-two per cent of the sample of student teachers returned a completed questionnaire.

The supervising teachers making up the sample represented 13 per cent of the total population of the cluster program supervising teachers in the fall term of 1972. Two supervising teachers were randomly selected from each cluster. Sixty-five per cent of the sample of supervising teachers returned a completed questionnaire.

It was assumed that these samples were representative of the population of student teachers and supervising teachers in the Michigan State University Cluster Program of Student Teaching.

Table 3.1 includes a summary of the Student Teaching Office report on the number of student teachers in each center where clusters were located, and the number of elementary and secondary clusters in each center. Figure 1 provides the geographic locations of the centers.

TABLE 3.1. Summary of Centers Where Student Teachers Were Assigned and the Number of Cluster Student Teachers and Clusters.

Center	Number of Student Teachers	Number of Clusters	
		Elementary	Secondary
Battle Creek	10	1	
Benton Harbor/ Niles	21	2	2
Flint	32	2	2
Grand Rapids	18	1	2
Jackson	19	2	1
Lansing	91	5	7
Livonia	23	1	1
Macomb	12	1	1
Pontiac	35	2	2
Saginaw	37	2	4
Suburban Area	20	1	1
Walled Lake	22	1	2
Totals	340	50 Clusters	

#### DESIGN OF THE STUDY

A questionnaire was designed consisting of criteria selected from the literature referred to earlier in this study. Of particular importance were those specifications



FIGURE 1. Geographic Location of Michigan State University Student Teaching Cluster Centers.

suggested in the Johnson<sup>2</sup> and Youstra<sup>3</sup> studies, both of which provided pertinent criteria related to this study. A copy of the questionnaire and cover letter are included in Appendix A, while the tabulated results from the total number of responses given to each criterion can be found in Appendix B.

A pilot administration of the questionnaire used in the study was submitted to student teachers, supervising teachers, center directors, public school principals and clinical consultants in elementary and secondary schools located in Flint, Pontiac and Lansing, Michigan, of the Michigan State University cluster program student teaching centers, in order to eliminate ambiguities and redundancy. Suggestions made by these respondents were considered in preparing the final questionnaire.

After printing, copies of the questionnaire, with a letter of transmittal and a stamped, self-addressed envelope, were mailed to each of the 319 persons selected from the "Fall Term, 1972, Report of Student Teachers Placed."<sup>4</sup>

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<sup>2</sup>Johnson, op. cit., pp. 83-87.

<sup>3</sup>Youstra, op. cit., pp. 72-75.

<sup>4</sup>"Fall Term, 1972, Report of Student Teachers Placed," op. cit.

COLLECTION OF DATA

A total of 319 copies of the questionnaire were mailed to those subjects that participated in the Michigan State University Cluster Program during the fall term of 1972. Table 3.2 indicates the population distribution and the number of responses received.

TABLE 3.2. Summary of Population Distribution and Responses.

Subjects	Number Sent	Number Returned	Percentage Returned
Total Population	319	231	72
Clinical Consultants	42	36	86
Center Directors	13	10	77
Student Teachers	132	95	72
Principals	44	33	75
Supervising Teachers	88	57	65

Each return envelope and questionnaire were marked with a number. This number was clearly visible to the participants and was placed on the material in case a follow-up letter was needed.

Questionnaires were mailed to school addresses of



the 319 participants of which 44 were principals, 42 clinical consultants, 88 supervising teachers, 13 center directors and 132 student teachers where there were cluster programs in the fall term of 1972. A total of 231 questionnaires were returned after the mailing. The date that all questionnaires were to be returned was February 12, 1973. To encourage further returns and thereby obtain as accurate results as possible, a follow-up mailing was made to those who had not returned the instrument by February 18, 1973. No survey instruments were returned as a result of the follow-up letter. The total number of questionnaires returned and used in the study was 231, or a percentage of 72.

In Table 3.3 a distribution is shown of the types of schools in which the participants taught. Elementary school positions were held by 45 per cent of the participants, while 38 per cent of the positions were held by senior high school and 13 per cent by middle or junior high school participants.

TABLE 3.3. Summary of Population Distribution and Type of School.

Subjects	Elementary (K-5 or 6)	Middle (6-9)	Senior High (9-12 or 10-12)	MSU Staff
Clinical Consultants	13	5	18	--
Center Directors	--	--	--	10
Student Teachers	46	15	34	--
Principals	16	5	12	--
Supervising Teachers	28	5	24	--
Totals	103	30	88	10 (231)
Percentages	45%	13%	38%	4% (100)

#### SCORING AND VALIDITY OF THE DATA

The study is a normative survey and exploratory in nature. The criteria that were presented to the subjects during the fall term of 1972 were part of the study.

Each questionnaire returned was checked to determine if the respondent was a student teacher, public school principal, supervising teacher, center director or clinical consultant. The instrument was then coded for IBM key punch processing and that data were transferred to IBM cards. The analysis of the data was performed through the use of a CDC 3600 computer.

The mean scores of the student teachers, principals, supervising teachers, center directors and clinical consultants were matched with each other as a group. The scores of 30 dependent variables consisted of the mean differences between the five groups.

Finn's<sup>5</sup> multivariate analysis of variance was used to find overall significance and avoid the problems of compounded alpha errors. This statistic investigated all of the dependent measures as a group. The procedures provided simultaneous comparison across the thirty measures. Upon finding overall significance, the differences of the means was justified. The .05 level of significance was used.

#### ITEMS TO BE TESTED

The following list of criteria resulted from a review of literature, pertinent studies and publications regarding suggested criteria as being desirable for the selection of clinical consultants. The original lists of criteria were edited to remove any overlap or redundancy, and to permit the respondents to react to each criterion with as much objectivity as possible.

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<sup>5</sup>Jeremy D. Finn, "Multivariate," Version 4 (Buffalo: State University of New York at Buffalo, Department of Educational Psychology, June 1968).

Criteria

1. Possess the level of academic preparation required by state certification laws.
2. Have completed at least three years of successful teaching experience.
3. Possess a bachelor's degree.
4. Possess a master's degree.
5. Possess a specialist degree.
6. Possess an earned doctorate degree.
7. Participate in the program willingly and look upon supervising the growth of student teachers as a contribution to the profession.
8. Demonstrate or has demonstrated ethical principles in guiding his actions.
9. Be recommended by his or her administrators, co-workers and by the student teaching staff of the teacher education institution.
10. Possess the ability to diagnose, analyze, and evaluate the behavior of children, student teachers, and himself.
11. Demonstrate that his or her work is the result of organized planning based on well defined objectives.
12. Reflect a positive professional attitude and a real liking and respect for teaching.
13. Be able to establish a feeling of security on the part of student teachers by clarifying his responsibilities throughout the student teaching period.
14. Be able to demonstrate and understand the basic principles of effective teaching and learning.
15. Be able to exhibit a cooperative attitude in relationships with other members of the staff.
16. Have worked with student teachers and acquired a basic understanding of the responsibilities of a supervising teacher.

17. Be enthusiastic regarding the role of clinical consultant.
18. Be able to consider new and different teaching techniques in an open-minded manner.
19. Be able to help student teachers to develop understanding of their strengths and weaknesses and foster in them a healthy self-concept.
20. Be able to utilize conferences with student teachers as a form of teaching and learning through discussion.
21. Be or is willing to become associated with organizations concerned with student teaching such as The Association of Teacher Educators and M-Step.
22. Be capable of working with the student teachers and building staff in developing individual participatory schedules based on diagnosed needs of the student teachers in the building.
23. Show willingness in providing classroom supervision of student teachers in the building in cooperation with the regular classroom teachers.
24. Be able to help the student teachers in the building on such matters as lesson planning, discipline, and human relationships, which are called for by the objectives of the courses they teach.
25. Be capable of taking corrective measures which will improve difficult situations.
26. Be able to demonstrate an acquaintance with the literature of his or her professional field.
27. Have developed an appreciation for people who are different in culture, racial, religious, economic, and national background, and is willing to accord them full equality of opportunity.
28. Set positive example for student teachers in personal appearance and hygiene, grooming, speech and habits.
29. Be able to utilize recent developments and trends in the teaching profession.

30. Have an understanding of the program, personnel, and problems of cooperating schools, especially at the level where he or she is the clinical consultant.<sup>6</sup>

### SUMMARY

Chapter III includes descriptions of the procedures, methods, and sources of data utilized to investigate the criteria used to select clinical consultants in the Michigan State University Cluster Program of Student Teaching. Thirty criteria were selected from the literature, from previous studies, and from a pilot survey to form the basis of the questionnaire. The instrument was mailed to 319 subjects who participated in the cluster program during the fall term of 1972. From this population, 213 usable questionnaires, a return of 72 per cent, resulted.

The data from the returned instruments were then quantified and Finn's multivariate analysis of variance was used to find overall significance at the .05 level.

Analyses of the data collected will be described in Chapter IV.

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<sup>6</sup>These criteria are also found in the questionnaire, which is in Appendix A. They are placed here for convenient reference in reading Chapter IV.

## CHAPTER IV

### ANALYSIS OF DATA

#### INTRODUCTION

This chapter contains the analyses of data which were gathered to support the hypotheses which were:

1. There will be no commonly accepted criteria for selection of clinical consultants which are recognized by student teachers, supervising teachers, public school principals, center directors and clinical consultants.
2. The elementary school cluster personnel will not identify a different list of selection criteria than will the secondary school cluster personnel.

In order to test these hypotheses, 30 selection criteria were identified from the literature of teacher education and from previous studies. These selection criteria were then incorporated in a questionnaire which was submitted as a pilot study to student teachers, supervising teachers, public school principals, center directors and clinical consultants in elementary and secondary schools located in Flint, Pontiac and Lansing, Michigan, of the Michigan State University cluster program student teaching centers. The revised instrument was then mailed to 319 subjects who participated in the Michigan State University cluster program during the fall term of 1972. The data

collected in this study are based upon the replies of 231 respondents who represent 72 per cent of the subjects surveyed.

### TESTS OF THE HYPOTHESES

#### Hypothesis 1

According to Hypothesis 1 there will be no commonly accepted criteria for selection of clinical consultants which are recognized by student teachers, supervising teachers, public school principals, center directors and clinical consultants. An F-test was used to test the difference between mean scores of the replies of the five groups.

In order to test this hypothesis, 30 criteria were incorporated in the questionnaire. The respondents were requested to check in the appropriate box if the criterion is (1) important (a basic, fundamental requirements); (2) has some importance (necessary, but not absolutely essential) and (3) has no importance (is not relevant to the success of the clinical consultant). Appendix B contains the frequency of responses to each of the questionnaire items by the respondents.

Table 4.1 presents the results of the F-test for the multivariate test of equality for the effect of group responses upon the 30 criteria.



TABLE 4.1. Effect of Group Responses Upon Selection Criteria.

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F-ratio for Multivariate Test of Equality of Mean Vectors = 1.83

Degrees of Freedom = 120 and 785.74

P Less Than 0.0001

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With initial differences adjusted, the effect of the five groups on the selection criteria were proven to be significant at P less than 0.0001. Requiring the level of significance at the .05 level, Hypothesis 1 can be accepted on the basis of the data acquired. Thus, it can be concluded that there is a significant difference at the accepted confidence level between the socres of the five groups. This means that the five groups in the cluster program did not agree upon all the 30 criteria.

### Hypothesis 2

Hypothesis 2 states that the elementary school cluster personnel will not identify a different list of selection criteria than will the secondary school cluster personnel.

The F-ratio for multivariate test of equality on the type of school effect upon the selection criteria, as shown in Table 4.2, with 30 univariates eliminated, shows the type of school effect was not significant at the P less than

TABLE 4.2. Effect of Type of School Upon Selection Criteria.

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F-ratio for Multivariate Test of Equality of Mean Vectors = .860			
D.F. = 90 and 590.43		P less than .814	

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Variable	Between Means Sq.	Univariate F	P Less Than .05
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1	0.12	0.67	.5683
2	0.03	0.20	.2012
3	0.01	0.06	.9810
4	0.25	0.45	.7162
5	0.21	0.48	.6993
6	0.10	0.28	.8369
7	0.01	0.11	.9543
8	0.31	1.92	.1277
9	0.44	1.57	.1975
10	0.18	1.57	.1977
11	0.88	3.18	.0647
12	0.02	0.49	.6897
13	0.36	2.32	.0760
14	0.05	0.40	.7511
15	0.14	0.90	.4407
16	0.63	2.20	.0887
17	0.09	0.68	.5634
18	0.06	0.60	.6125
19	0.10	1.40	.2427
20	0.09	0.51	.6775
21	0.21	0.45	.7201
22	0.14	0.69	.5608
23	0.22	0.61	.6087
24	0.13	0.71	.5466
25	0.18	1.34	.2624
26	0.49	1.26	.2892
27	0.04	0.20	.8898
28	0.35	0.79	.4983
29	0.23	0.77	.5126
30	0.17	0.89	.4472

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Degrees of Freedom for Hypothesis = 3			
Degrees of Freedom for Error = 226			

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.05 level. Hypothesis 2 can not be accepted at the .05 confidence level between the scores of the types of schools, but is rejected at the P less than 0.814 level.

One can conclude from the quantitative data presented in this study that elementary school cluster personnel did not identify a different list of criteria than the secondary school cluster personnel.

#### ADDITIONAL COMPARATIVE ANALYSIS

Following the testing of the hypotheses, the quantitative data from the questionnaire results were applied to each selection criterion measured in the study.

A univariate analysis of variance compared the mean scores of the student teachers, supervising teachers, public school principals, center directors and clinical consultants with each other on Criterion I: Academic Preparation. The analysis yielded an F-ratio of 6.111 with a probability less than 0.0002.

On the basis of the findings presented in Table 4.3, the five groups disagreed upon Criterion I.

TABLE 4.3. Criterion I. Possess the Level of Academic Preparation Required by State Certification Laws. (Univariate Analysis of Variance Comparing the Mean Scores of the Five Groups of Respondents).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	1.002	6.111	0.0002
Within Groups	226	0.164		
Total	230	1.166		

Since there were disagreements on Criterion I, the data were further analyzed by a comparison of mean scores. As reported in Table 4.4, the higher mean score of the student teachers suggests that they disagreed more than the other groups on Criterion I. However, the total population rated Criterion I as being important.

TABLE 4.4. Group Mean Scores for Criterion I.

Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers
1.030	1.035	1.000	1.194	1.315

A univariate analysis of variance compared the mean scores for the five groups with each other on Criterion II:

Teaching Experience. The analysis yielded an F-ratio of 3.574 and with a probability of 0.0076.

On the basis of the findings presented in Table 4.5, the five groups disagreed upon Criterion II.

TABLE 4.5. Criterion II. Have Completed at Least Three Years of Successful Teaching Experience (Univariate Analysis of Variance Comparing the Mean Scores of the Five Groups of Respondents).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	0.581	3.574	0.0076
Within Groups	226	0.162		
Total	230	0.743		

Since there were disagreements on Criterion II, the data were further analyzed by comparison of mean scores. As reported in Table 4.6, the higher mean score of the student teachers suggests that they disagreed more than the other groups on Criterion II.

TABLE 4.6. Group Mean Scores for Criterion II.

Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers
1.181	1.035	1.200	1.055	1.263

A univariate analysis of variance compared the mean scores for the five groups with each other on Criterion III: Bachelor's Degree. The analysis yielded an F-ratio of 2.847 and a probability of 0.0249.

On the basis of the findings presented in Table 4.7, the population disagreed upon Criterion III.

TABLE 4.7. Criterion III. Possess a Bachelor's Degree  
(Univariate Analysis of Variance Comparing the Mean Scores of the Five Groups).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	0.459	2.847	0.0249
Within Groups	226	0.161		
Total	230	0.620		

Because there were disagreements among the population on Criterion III, the data were further analyzed by comparing mean scores. As reported in Table 4.8, the higher mean score of the student teachers suggests that they disagreed more than the other part of the population on Criterion III. Criterion III was given a rating of important by the total population.

TABLE 4.8. Group Mean Scores for Criterion III.

Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers
1.030	1.052	1.100	1.138	1.242

A univariate analysis of variance compared the mean scores of the population with each other on Criterion IV: Master's Degree. The analysis produced an F-ratio of 9.125 and a probability of 0.0001.

On the basis of the findings presented in Table 4.9, the five groups disagreed upon Criterion IV.

TABLE 4.9. Criterion IV. Possess a Master's Degree (Univariate Analysis of Variance Comparing the Mean Scores of the Five Groups of Respondents).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	4.427	9.125	0.0001
Within Groups	226	0.485		
Total	230	4.912		

Since there were disagreements on Criterion IV, the data were further analyzed by comparison of mean scores. Table 4.10 shows the student teachers having the highest

mean score, which indicates that they disagreed more on Criterion IV than the other members of the population. Having some importance was the rating given to Criterion IV by the total population.

TABLE 4.10. Group Mean Scores for Criterion IV.

Principals	Supervising Teachers	Center Directors	Center Consultants	Student Teachers
1.636	2.017	1.900	2.027	2.421

A univariate analysis of variance compared the mean scores for the five groups with each other on Criterion VIII: Ethical Principles. The analysis yielded an F-ratio of 4.961 and a probability of 0.0008.

On the basis of the findings presented in Table 4.11, the five groups disagreed upon Criterion VIII.

TABLE 4.11. Criterion VIII. Demonstrate or Has Demonstrated Ethical Principles in Guiding His Actions (Univariate Analysis of Variance Comparing the Mean Scores of the Five Groups of Respondents).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	0.772	4.961	0.0008
Within Groups	226	0.155		
Total	230	0.927		



Because there were disagreements among the respondents on Criterion VIII, the data were further analyzed by comparing mean scores. As reported in Table 4.12, the highest mean score of the student teachers suggests that they disagreed more than the other members of the population on Criterion VIII. However, the total population rated Criterion VIII as being important.

TABLE 4.12. Group Mean Scores for Criterion VIII.

Principals	Supervising Teachers	Center Directors	Center Consultants	Student Teachers
1.000	1.017	0.900	1.055	1.242

A univariate analysis of variance compared the mean scores of the populations with each other on Criterion IX: Recommended by Administrators or Co-Workers. The analysis yielded an F-ratio of 4.715 and a probability of 0.0012.

On the basis of the findings presented in Table 4.13, the five groups disagreed on Criterion IX.

TABLE 4.13. Criterion IX. Be Recommended by His or Her Administrators, Co-Workers and by the Student Teaching Staff of the Teacher Education Institution (Univariate Analysis of Variance Comparing the Mean Scores of Five Groups of Respondents).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	1.254	4.715	0.0012
Within Groups	226	0.266		
Total	230	1.520		

Since there were disagreements on Criterion IX, the data were further analyzed by comparing the mean scores. Table 4.14 shows the student teachers having the highest mean score, which indicates that they disagreed more on Criterion IX than the other members of the population. Important was the rating given to Criterion IX by the total population.

TABLE 4.14. Group Mean Scores for Criterion IX.

Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers
1.242	1.192	1.100	1.083	1.452

A univariate analysis of variance compared the mean

scores for the five groups with each other on Criterion XI: Organized Planning. The analysis yielded an F-ratio of 7.332 and a probability of 0.0001.

On the basis of the findings presented in Table 4.15, the five groups disagreed upon Criterion XI.

TABLE 4.15. Criterion XI. Demonstrate that His or Her Work Is the Result of Organized Planning Based on Well Defined Objectives (Univariate Analysis of Variance Comparing the Mean Scores of the Five Groups of Respondents).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	1.885	7.332	0.0001
Within Groups	226	0.257		
Total	230	2.142		

Because there were disagreements among the respondents on Criterion XI, the data were further analyzed by comparing mean scores. As reported in Table 4.16 the highest mean score of the student teachers suggests that they disagreed more than the other members of the population on Criterion XI. However, the total population rated Criterion XI as important.

TABLE 4.16. Group Mean Scores for Criterion XI.

Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers
1.242	1.140	0.900	1.388	1.515

A univariate analysis of variance compared the mean scores of the members of the population with each other on Criterion XX: Utilizes Conferences. The analysis produced an F-ratio of 3.571 and a probability of 0.0076.

On the basis of the findings presented in Table 4.17, the group disagreed on Criterion XX.

TABLE 4.17. Criterion XX. Be Able to Utilize Conferences With Student Teachers as a Form of Teaching and Learning Through Discussion (Univariate Analysis of Variance Comparing the Mean Scores of the Five Groups of Respondents).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	0.034	3.571	0.0076
Within Groups	226	0.170		
Total	230	0.204		

Since there were disagreements on Criterion XX, the data were further analyzed by comparing mean scores.

Table 4.18 shows the student teachers once again having the highest mean score, which indicates that they disagreed more on Criterion XX than the other members of the population. Important was the rating given to Criterion XX by the total population.

TABLE 4.18. Group Mean Scores for Criterion XX.

Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers
1.121	1.070	1.100	1.083	1.294

A univariate analysis of variance compared the mean scores for the five groups with each other on Criterion XXIII: Providing Classroom Supervision. The analysis yielded an F-ratio of 4.959 and a probability of 0.0008.

On the basis of the findings presented in Table 4.19, the five groups disagreed upon Criterion XXIII.

TABLE 4.19. Criterion XXIII. Shows Willingness in Providing Classroom Supervision of Student Teachers in the Building in Cooperation with Regular Classroom Teachers (Univariate Analysis of Variance Comparing the Mean Scores of the Five Groups of Respondents).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	1.619	4.959	0.0008
Within Groups	226	0.326		
Total	230	1.945		

Because there were disagreements among the populations on Criterion XXIII, the data were further analyzed by comparison of mean scores. As reported in Table 4.20, the highest mean score of the student teachers suggests that they disagreed more than the other members of the population on Criterion XXIII. However, the total population rated Criterion XXIII as being important.

TABLE 4.20. Group Mean Scores for Criterion XXIII.

Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers
1.181	1.280	1.100	1.083	1.505

A univariate analysis of variance compared the mean scores of the population with each other on Criterion XXVIII: Set Positive Example. The analysis produced an F-ratio of 17.617 and a probability of 0.0001.

On the basis of the findings presented in Table 4.21, the group disagreed on Criterion XXVIII.

TABLE 4.21. Criterion XXVIII. Set Positive Example for Student Teachers in Personal Appearance and Hygiene, Grooming, Speech, and Habits (Univariate Analysis of Variance Comparing the Mean Scores of the Five Groups of Respondents).

Source of Variation	Degrees of Freedom	Mean Squares	Univariate F	P Less Than
Between Groups	4	6.012	17.617	0.0001
Within Groups	226	0.341		
Total	230	6.353		

Since there were disagreements on Criterion XXVIII, the data were further analyzed by comparison of mean scores. Table 4.22 shows the student teachers having the highest mean score, which indicates that they disagreed more on Criterion XXVIII than the other members of the population. Being important was the rating given to Criterion XXVIII by the total population.

TABLE 4.22. Group Mean Scores for Criterion XXVIII.

Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers
1.090	1.175	1.300	1.250	1.831

Any further information about the scores can be found in Appendix C.

### SUMMARY OF THE FINDINGS

Chapter IV has presented the analyses and findings from the data collected from 231 subjects who participated in the Michigan State University Cluster Program during the fall term of 1972.

Two hypotheses were statistically analyzed and the findings can be summarized as follows:

#### Hypothesis 1

Hypothesis 1: Accepted at the .05 level of significance. Finding:

- a. Of the criteria that were significant (1,,2, 3, 4, 8, 9, 11, 20, 23 and 28) the student teachers disagreed more on these criteria than any of the other members of the population. Although the total population rated most of the criteria as being important, Criterion IV was rated as having some importance by the total group.
- b. Criteria 5, 6, 7, 10, 12, 13, 14, 15, 16, 17, 18, 19, 21, 22, 24, 25, 26, 27, 29 and 30 were not significant at the .05 level of significance, but the majority of the population rated most of the criteria as being important. The exceptions were criteria 5, 6, 21 and 29, which were rated as having some importance.

#### Hypothesis 2

Hypothesis 2: Rejected at the .05 level of significance. Finding:

- a. Elementary school cluster personnel did not identify a different list of selection criteria than the secondary school cluster personnel.



Chapter V presents a summary of this study along with the report of the conclusions. Recommendations are made for further study and for the implementation of the results of the data revealed in this study.

## CHAPTER V

### SUMMARY, CONCLUSIONS, IMPLICATIONS AND RECOMMENDATIONS

#### SUMMARY

This study was concerned with the identification of selection criteria for cluster consultants in student teaching programs. The hypotheses tested in this study were as follows:

1. There will be no commonly accepted criteria for selection of clinical consultants which are recognized by student teachers, supervising teachers, public school principals, center directors and clinical consultants.
2. The elementary school cluster program personnel will not identify a different list of selection criteria than will the secondary school cluster program personnel.

Hypothesis 1 was measured by an F-test which yielded a ratio of 1.83, significant at the .05 level. Hypothesis 1 was accepted at the 0.0001 level of significance. The five groups of respondents in the cluster program indicated that they did not agree upon all the 30 selection criteria. Twenty-six of the criteria which were considered were identified as worthy of use for selection purposes.

Hypothesis 2 was also measured by an F-test which yielded a ratio of .860, significant at the 0.814 level.

Hypothesis 2 was rejected at the .05 level of significance. Elementary school cluster personnel did not identify a different list of criteria from the secondary school cluster personnel.

A list of criteria supported by this investigation and considered "basic and necessary" by a majority of the subjects in the cluster program of student teaching may be found in Appendix D.

### CONCLUSIONS AND IMPLICATIONS

Conclusion 1: Even with a pre-determined list of criteria for the selection of clinical consultants, cluster program personnel did not totally agree as to their importance.

Implication 1: Although the cluster program of student teaching reflects a relative homogeneity of location and size, some lack of congruity in programs seems to be reflected in the data presented in this study. This raises the question of even greater diversity when widely different geographic, social, or political influences exist. To the extent that commonly accepted norms for teacher preparation are desirable, the question of such diversity demands further investigation. It may be that local selection criteria need to be developed which take into account differences in philosophy, program and purposes of local teacher education programs.

Conclusion 2: Among the respondents in the cluster program of student teaching, there was a nucleus of criteria which were agreed upon as important by most of the population.

Implication 2: This nucleus, then, can provide a basis for the further study of criteria for the selection of clinical consultants. However, the fact that some criteria received agreement as well as disagreement does not insure that these criteria really relate to effective clinical consultants. Therefore, this investigation only constitutes an initial approximation to this crucial area. One possible approach would be to determine the actual performance of clinical consultants selected on the basis of these criteria. This investigation thus serves only to generate an initial list for further study and comparison.

Conclusion 3: There are insufficient numbers of clinical consultants available for vigorous application of any but the most basic selection criteria.

Implication 3: This conclusion requires further research. For example, we need to devise experimental situations where there is a surplus of potential clinical consultants, and to verify that school personnel will in fact be selected according to these criteria. If these criteria are valid (see implication 2), this implies initiating whatever preparation programs will significantly increase the number of qualified clinical consultant applicants.

Conclusion 4: These selection criteria serve little or no useful purpose unless they are utilized in the implementation of teacher education programs that involve clusters.

Implication 4: These criteria should be carefully considered by public school and university personnel. Procedures for their application in the selection process should be agreed upon by those involved. To accomplish this purpose, copies of these criteria should be placed in the hands of persons involved in cluster programs of teacher education. This should include public school and university administrators and teachers.

#### RECOMMENDATIONS FOR FURTHER RESEARCH

1. A study should be made to assess the actual performance of clinical consultants chosen on the basis of the selection criteria developed in this investigation. The fact that these criteria received agreement among the respondents from the cluster program does not insure that these criteria really relate to effective clinical performance.
2. An investigation should be initiated which is designed to compare the performance of clinical consultants selected by the criteria suggested here with the performance of clinical consultants not so chosen.
3. The question of whether commonly accepted criteria for the selection of clinical consultants are affected by local factors demands further investigation.
4. Because student teaching programs are undergoing continuous change, it is recommended that selection criteria for clinical consultants be subjected to periodic evaluation as to their relevance and practicality.

This study, it is hoped, will contribute, in a small way, to the improvement of clinical consultant selection procedures at the public school and university level. It is offered as an encouragement to university and public school leadership in raising the quality of student teaching programs and thus to the refinement of teacher education.

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## APPENDICES

**APPENDIX A**

**QUESTIONNAIRE AND COVER LETTER SENT TO STUDENT TEACHERS,  
SUPERVISING TEACHERS, PRINCIPALS, CENTER  
DIRECTORS AND CLINICAL CONSULTANTS**

Michigan State University  
College of Education  
807-A Cherry Lane  
East Lansing, Michigan 48823

Dear Fellow Educator:

We are attempting to determine (a) how clinical consultants of student teaching are selected for their positions; and (b) if there is any agreement, among the personnel who work with student teachers, regarding the criteria used for selection. Would you please complete the following questionnaire and return it before February 12, 1973?

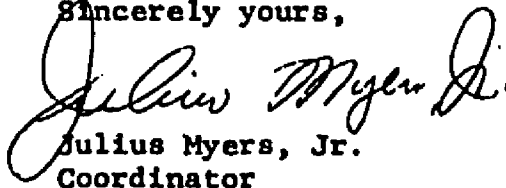
For our program, the clinical consultant is defined as a member of the cluster program that is responsible for the student teachers assigned to the building, and works with the building principal and other teachers to provide a variety of experiences for the student teachers.

This information is being collected for research purposes only. Therefore, no information identifying any individual will be published. We will be pleased to send you a summary of the results, if you desire.

Enclosed is a postage-paid return envelope. While you have the material at hand and before the big rush, please complete and return the questionnaire.

Thank you in advance for your assistance in this necessary research endeavor.

Sincerely yours,

  
Julius Myers, Jr.  
Coordinator

Encl: Questionnaire  
Return Envelope

## INTRODUCTION

The purpose for asking you to respond to the following items is to find out what your opinions are as to their importance as criteria for the selection of clinical consultants. As a member of the cluster program team, you may or may not be directly involved in the selection of the clinical consultant in your building. However, by virtue of your position, experience, contacts in the total field of teacher education, you are in a position to express an important opinion concerning the criteria used in the selection of clinical consultants. Thus, we hope you will feel free to express your opinion on each item, qualifying your responses if you feel the need, and we also hope you will add any other criteria which you feel are important.

You or your school will not be specifically identified, but your responses will be part of the total sample, which includes persons involved in the Michigan State University Cluster Program of Student Teaching.

CRITERIA FOR THE SELECTION OF CLINICAL CONSULTANTS  
MICHIGAN STATE UNIVERSITY  
COLLEGE OF EDUCATION

## INFORMATION:

1. YOUR POSITION

Administrator ☐      Teacher ☐      Center Director ☐  
Clinical consultant ☐      Student Teacher ☐

2. TYPE/LEVEL OF SCHOOL

Secondary ☐      Middle ☐      Elementary ☐      MSU ☐

## 3. Location of the school \_\_\_\_\_

City / Town

## INSTRUCTIONS:

Place a check in one of the appropriate boxes following each item:

1. First box - Is important (a basic, fundamental requirement)
2. Second box- Has some importance (necessary, but not absolutely essential)
3. Third box- Has no importance (is not relevant to the success of the clinical consultant)

If you wish to qualify your responses, or add to the criteria please do so in the space provided following each item.

THE CLINICAL CONSULTANT SHOULD:

- |  | <u>Is</u><br><u>Imp.</u> | <u>Has some</u><br><u>Imp.</u> | <u>Has no</u><br><u>Imp.</u> |
|--|--------------------------|--------------------------------|------------------------------|
| 1. Possess the level of academic preparation required by state certification laws. | <input type="checkbox"/> | <input type="checkbox"/>       | <input type="checkbox"/>     |

Comments:

	<u>Is</u> <u>Imp.</u>	<u>Has some</u> <u>Imp.</u>	<u>Has no</u> <u>Imp.</u>
2. Have completed at least three years of successful teaching experience.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
3. Possess a bachelor's degree.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
4. Possess a master's degree.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
5. Possess a specialist degree.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
6. Possess an earned doctorate degree.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
7. Participate in the program willingly and look upon supervising the growth of student teachers as a contribution to the profession.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
8. Demonstrate or has demonstrated ethical principles in guiding his actions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
9. Be recommended by his or her administrators, co-workers and by the student teaching staff of the teacher education institution.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
10. Possess the ability to diagnose, analyze, and evaluate the behavior of children, student teachers, and himself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			

	<u>Is</u> <u>Imp.</u>	<u>Has some</u> <u>Imp.</u>	<u>Has no</u> <u>Imp.</u>
11. Demonstrate that his or her work is the result of organized planning based on well defined objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
12. Reflect a positive professional attitude and a real liking and respect for teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
13. Be able to establish a feeling of security on the part of student teachers by clarifying his responsibilities throughout the student teaching period.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
14. Be able to demonstrate and understand the basic principles of effective teaching and learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
15. Be able to exhibit a cooperative attitude in relationships with other members of the staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
16. Have worked with student teachers and acquired a basic understanding of the responsibilities of a supervising teacher.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
17. Be enthusiastic regarding the role of clinical consultant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
18. Be able to consider new and different teaching techniques in an open-minded manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			



	<u>Is</u> <u>Imp.</u>	<u>Has some</u> <u>Imp.</u>	<u>Has no</u> <u>Imp.</u>
19. Be able to help student teachers to develop understanding of their strengths and weaknesses and foster in them a healthy self-concept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
20. Be able to utilize conferences with student teachers as a form of teaching and learning through discussion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
21. Be or is willing to become associated with organizations concerned with student teaching such as The Association of Teacher Educators and M-Step.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
22. Be capable of working with the student teachers and building staff in developing individual participatory schedules based on diagnosed needs of the student teachers in the building.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
23. Show willingness in providing classroom supervision of student teachers in the building in cooperation with the regular classroom teachers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
24. Be able to help the student teachers in the building on such matters as lesson planning, discipline, and human relationships, which are called for by the objectives of the courses they teach.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			
25. Be capable of taking corrective measures which will improve difficult situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			

<u>Is</u> <u>Imp.</u>	<u>Has some</u> <u>Imp.</u>	<u>Has no</u> <u>Imp.</u>
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26. Be able to demonstrate an acquaintance with the literature of his or her professional field.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

Comments:

27. Have developed an appreciation for people who are different in culture, racial, religious, economic, and national background, and is willing to accord them full equality of opportunity.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

Comments:

28. Set positive example for the student teachers in personal appearance and hygiene, grooming, speech, and habits.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

Comments:

29. Be able to utilizes recent developments and trends in the teaching profession.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

Comments:

30. Have an understanding of the program, personnel, and problems of cooperating schools, especially at the level where he or she is the clinical consultant.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

Comments:

Please return before February 12, 1973.

## **APPENDIX B**

**TOTAL NUMBER OF RESPONSES GIVEN TO EACH CRITERION BY  
STUDENT TEACHERS, SUPERVISING TEACHERS, CENTER  
DIRECTORS, PRINCIPALS AND CLINICAL CONSULTANTS**

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
13. Be able to establish a feeling of security on the part of student teachers by clarifying his responsibilities throughout the student teaching period.	75	19	1
14. Be able to demonstrate and understand the basic principles of effective teaching and learning.	81	12	1
15. Be able to exhibit a cooperative attitude in relationships with other members of the staff.	75	18	2
16. Have worked with student teachers and acquired a basic understanding of the responsibilities of a supervising teacher.	74	15	6
17. Be enthusiastic regarding the role of clinical consultant.	80	14	1
18. Be able to consider new and different teaching techniques in an open-minded manner.	85	9	1
19. Be able to help student teachers to develop understanding of their strengths and weaknesses and foster in them a healthy self-concept.	86	9	0
20. Be able to utilize conferences with student teachers as a form of teaching and learning through discussion.	69	24	2
21. Be or is willing to become associated with organizations concerned with student teaching such as The Association of Teacher Educators and M-Step.	24	49	18

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
22. Be capable of working with the student teachers and building staff in developing individual participatory schedules based on diagnosed needs of the student teachers in the building.	67	28	0
23. Show willingness in providing classroom supervision of student teachers in the building in cooperation with the regular classroom teachers.	57	24	11
24. Be able to help the student teachers in the building on such matters as lesson planning, discipline, and human relationships, which are called for by the objectives of the courses they teach.	77	14	4
25. Be capable of taking corrective measures which will improve difficult situations.	81	13	1
26. Be able to demonstrate an acquaintance with the literature of his or her professional field.	35	47	13
27. Have developed an appreciation for people who are different in culture, racial, religious, economic, and national background, and is willing to accord them full equality of opportunity.	74	19	2
28. Set positive example for student teachers in personal appearance and hygiene, grooming, speech, and habits.	45	43	17
29. Be able to utilize recent developments and trends in the teaching profession.	52	36	4

	<u>Is</u> <u>Import-</u> <u>ant</u>	<u>Has</u> <u>Some</u> <u>Import-</u> <u>ance</u>	<u>Has</u> <u>No</u> <u>Import-</u> <u>ance</u>
30. Have an understanding of the program, personnel, and problems of cooperating schools, especially at the level where he or she is the clinical consultant.	74	19	2

## RESPONSES GIVEN BY PRINCIPALS

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
1. Possess the level of academic preparation required by state certification laws.	32	1	0
2. Have completed at least three years of successful teaching experience.	28	4	1
3. Possess a bachelor's degree.	30	2	0
4. Possess a master's degree.	13	16	3
5. Possess a specialist degree.	0	16	15
6. Possess an earned doctorate degree.	0	6	25
7. Participate in the program willingly and look upon supervising the growth of student teachers as a contribution to the profession.	33	0	0
8. Demonstrate or has demonstrated ethical principles in guiding his actions.	33	0	0
9. Be recommended by his or her administrators, co-workers and by the student teaching staff of the teacher education institution.	23	8	1
10. Possess the ability to diagnose, analyze, and evaluate the behavior of children, student teachers, and himself.	32	1	0
11. Demonstrate that his or her work is the result of organized planning based on well defined objectives.	25	8	0
12. Reflect a positive professional attitude and a real liking and respect for teaching.	32	1	0

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
13. Be able to establish a feeling of security on the part of student teachers by clarifying his responsibilities throughout the student teaching period.	29	4	0
14. Be able to demonstrate and understand the basic principles of effective teaching and learning.	28	5	0
15. Be able to exhibit a cooperative attitude in relationships with other members of the staff.	32	1	0
16. Have worked with student teachers and acquired a basic understanding of the responsibilities of a supervising teacher.	21	12	0
17. Be enthusiastic regarding the role of clinical consultant.	31	2	0
18. Be able to consider new and different teaching techniques in an open-minded manner.	31	2	0
19. Be able to help student teachers to develop understanding of their strengths and weaknesses and foster in them a healthy self-concept.	32	1	0
20. Be able to utilize conferences with student teachers as a form of teaching and learning through discussion.	30	3	0
21. Be or is willing to become associated with organizations concerned with student teaching such as The Association of Teacher Educators and M-Step.	5	23	5



	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
22. Be capable of working with the student teachers and building staff in developing individual participatory schedules based on diagnosed needs of the student teachers in the building.	11	17	5
23. Show willingness in providing classroom supervision of student teachers in the building in cooperation with the regular classroom teachers.	26	6	1
24. Be able to help the student teachers in the building on such matters as lesson planning, discipline, and human relationships, which are called for by the objectives of the courses they teach.	31	2	0
25. Be capable of taking corrective measures which will improve difficult situations.	31	2	0
26. Be able to demonstrate an acquaintance with the literature of his or her professional field.	11	21	1
27. Have developed an appreciation for people who are different in culture, racial, religious, economic, and national background, and is willing to accord them full equality of opportunity.	31	2	0
28. Set positive example for student teachers in personal appearance and hygiene, grooming, speech, and habits.	27	5	0
29. Be able to utilize recent developments and trends in the teaching profession.	25	8	0

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
30. Have an understanding of the program, personnel, and problems of cooperating schools, especially at the level where he or she is the clinical consultant. 29		3	1

## RESPONSES GIVEN BY SUPERVISING TEACHERS

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
1. Possess the level of academic preparation required by state certification laws.	51	4	0
2. Have completed at least three years of successful teaching experience.	53	3	0
3. Possess a bachelor's degree.	51	4	0
4. Possess a master's degree.	13	27	16
5. Possess a specialist degree.	5	18	33
6. Possess an earned doctorate degree.	2	11	43
7. Participate in the program willingly and look upon supervising the growth of student teachers as a contribution to the profession.	56	0	0
8. Demonstrate or has demonstrated ethical principles in guiding his actions.	54	2	0
9. Be recommended by his or her administrators, co-workers and by the student teaching staff of the teacher education institution.	46	9	1
10. Possess the ability to diagnose, analyze, and evaluate the behavior of children, student teachers, and himself.	50	5	0
11. Demonstrate that his or her work is the result of organized planning based on well defined objectives.	46	9	0
12. Reflect a positive professional attitude and a real liking and respect for teaching.	55	1	0

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
13. Be able to establish a feeling of security on the part of student teachers by clarifying his responsibilities throughout the student teaching period.	45	10	0
14. Be able to demonstrate and understand the basic principles of effective teaching and learning.	51	5	0
15. Be able to exhibit a cooperative attitude in relationships with other members of the staff.	49	7	0
16. Have worked with student teachers and acquired a basic understanding of the responsibilities of a supervising teacher.	46	10	0
17. Be enthusiastic regarding the role of clinical consultant.	49	7	0
18. Be able to consider new and different teaching techniques in an open-minded manner.	50	5	1
19. Be able to help student teachers to develop understanding of their strengths and weaknesses and foster in them a healthy self-concept.	52	4	0
20. Be able to utilize conferences with student teachers as a form of teaching and learning through discussion.	50	6	0
21. Be or is willing to become associated with organizations concerned with student teaching such as The Association of Teacher Educators and M-Step.	11	38	6

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
22. Be capable of working with the student teachers and building staff in developing individual participatory schedules based on diagnosed needs of the student teachers in the building.	42	11	1
23. Show willingness in providing classroom supervision of student teachers in the building in cooperation with the regular classroom teachers.	41	14	1
24. Be able to help the student teachers in the building on such matters as lesson planning, discipline, and human relationships, which are called for by the objectives of the courses they teach.	46	6	1
25. Be capable of taking corrective measures which will improve difficult situations.	49	5	1
26. Be able to demonstrate an acquaintance with the literature of his or her professional field.	25	27	4
27. Have developed an appreciation for people who are different in culture, racial, religious, economic, and national background, and is willing to accord them full equality of opportunity.	48	7	1
28. Set positive example for student teachers in personal appearance and hygiene, grooming, speech, and habits.	47	8	1
29. Be able to utilize recent developments and trends in the teaching profession.	36	17	3

	<u>Is</u> <u>Import-</u> <u>ant</u>	<u>Has</u> <u>Some</u> <u>Import-</u> <u>ance</u>	<u>Has</u> <u>No</u> <u>Import-</u> <u>ance</u>
30. Have an understanding of the program, personnel, and problems of cooperating schools, especially at the level where he or she is the clinical consultant. 48		7	1

## RESPONSES GIVEN BY CENTER DIRECTORS

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
1. Possess the level of academic preparation required by state certification laws.	10	0	0
2. Have completed at least three years of successful teaching experience.	8	2	0
3. Possess a bachelor's degree.	9	1	0
4. Possess a master's degree.	9	1	0
5. Possess a specialist degree.	1	1	8
6. Possess an earned doctorate degree.	1	0	9
7. Participate in the program willingly and look upon supervising the growth of student teachers as a contribution to the profession.	10	0	0
8. Demonstrate or has demonstrated ethical principles in guiding his actions.	9	0	0
9. Be recommended by his or her administrators, co-workers and by the student teaching staff of the teacher education institution.	9	1	0
10. Possess the ability to diagnose, analyze, and evaluate the behavior of children, student teachers, and himself.	10	0	0
11. Demonstrate that his or her work is the result of organized planning based on well defined objectives.	9	0	0
12. Reflect a positive professional attitude and a real liking and respect for teaching.	10	0	0

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
13. Be able to establish a feeling of security on the part of student teachers by clarifying his responsibilities throughout the student teaching period.	9	1	0
14. Be able to demonstrate and understand the basic principles of effective teaching and learning.	10	0	0
15. Be able to exhibit a cooperative attitude in relationships with other members of the staff.	10	0	0
16. Have worked with student teachers and acquired a basic understanding of the responsibilities of a supervising teacher.	7	3	0
17. Be enthusiastic regarding the role of clinical consultant.	10	0	0
18. Be able to consider new and different teaching techniques in an open-minded manner.	10	0	0
19. Be able to help student teachers to develop understanding of their strengths and weaknesses and foster in them a healthy self-concept.	10	0	0
20. Be able to utilize conferences with student teachers as a form of teaching and learning through discussion.	9	1	0
21. Be or is willing to become associated with organizations concerned with student teaching such as The Association of Teacher Educators and M-Step.	1	9	0



	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
22. Be capable of working with the student teachers and building staff in developing individual participatory schedules based on diagnosed needs of the student teachers in the building.	10	0	0
23. Show willingness in providing classroom supervision of student teachers in the building in cooperation with the regular classroom teachers.	9	1	0
24. Be able to help the student teachers in the building on such matters as lesson planning, discipline, and human relationships, which are called for by the objectives of the courses they teach.	10	0	0
25. Be capable of taking corrective measures which will improve difficult situations.	10	0	0
26. Be able to demonstrate an acquaintance with the literature of his or her professional field.	4	6	0
27. Have developed an appreciation for people who are different in culture, racial, religious, economic, and national background, and is willing to accord them full equality of opportunity.	9	1	0
28. Set positive example for student teachers in personal appearance and hygiene, grooming, speech, and habits.	7	3	0
29. Be able to utilize recent developments and trends in the teaching profession.	9	1	0

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
30. Have an understanding of the program, personnel, and problems of cooperating schools, especially at the level where he or she is the clinical consultapt. 8		2	0

## RESPONSES GIVEN BY CLINICAL CONSULTANTS

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
1. Possess the level of academic preparation required by state certification laws.	30	6	0
2. Have completed at least three years of successful teaching experience.	33	3	0
3. Possess a bachelor's degree.	31	5	0
4. Possess a master's degree.	9	19	8
5. Possess a specialist degree.	0	12	24
6. Possess an earned doctorate degree.	2	2	32
7. Participate in the program willingly and look upon supervising the growth of student teachers as a contribution to the profession.	34	1	1
8. Demonstrate or has demonstrated ethical principles in guiding his actions.	35	1	0
9. Be recommended by his or her administrators, co-workers and by the student teaching staff of the teacher education institution.	32	4	0
10. Possess the ability to diagnose, analyze, and evaluate the behavior of children, student teachers, and himself.	34	2	0
11. Demonstrate that his or her work is the result of organized planning based on well defined objectives.	23	13	0
12. Reflect a positive professional attitude and a real liking and respect for teaching.	35	1	0

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
13. Be able to establish a feeling of security on the part of student teachers by clarifying his responsibilities throughout the student teaching period.	33	3	0
14. Be able to demonstrate and understand the basic principles of effective teaching and learning.	33	3	0
15. Be able to exhibit a cooperative attitude in relationships with other members of the staff.	31	5	0
16. Have worked with student teachers and acquired a basic understanding of the responsibilities of a supervising teacher.	19	15	1
17. Be enthusiastic regarding the role of clinical consultant.	32	4	0
18. Be able to consider new and different teaching techniques in an open-minded manner.	32	4	0
19. Be able to help student teachers to develop understanding of their strengths and weaknesses and foster in them a healthy self-concept.	32	4	0
20. Be able to utilize conferences with student teachers as a form of teaching and learning through discussion.	31	4	0
21. Be or is willing to become associated with organizations concerned with student teaching such as The Association of Teacher Educators and M-Step.	11	20	4

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
22. Be capable of working with the student teachers and building staff in developing individual participatory schedules based on diagnosed needs of the student teachers in the building.	30	5	0
23. Show willingness in providing classroom supervision of student teachers in the building in cooperation with the regular classroom teachers.	31	4	0
24. Be able to help the student teachers in the building on such matters as lesson planning, discipline, and human relationships, which are called for by the objectives of the courses they teach.	32	3	0
25. Be capable of taking corrective measures which will improve difficult situations.	31	4	0
26. Be able to demonstrate an acquaintance with the literature of his or her professional field.	11	22	3
27. Have developed an appreciation for people who are different in culture, racial, religious, economic, and national background, and is willing to accord them full equality of opportunity.	24	12	0
28. Set positive example for student teachers in personal appearance and hygiene, grooming, speech, and habits.	28	7	1
29. Be able to utilize recent developments and trends in the teaching profession.	21	15	0

	<u>Is Import- ant</u>	<u>Has Some Import- ance</u>	<u>Has No Import- ance</u>
30. Have an understanding of the program, personnel, and problems of cooperating schools, especially at the level where he or she is the clinical consultant. 32		4	0

**APPENDIX C**

**SCORES OF STUDENT TEACHERS, PRINCIPALS, CENTER DIRECTORS,  
SUPERVISING TEACHERS AND CLINICAL CONSULTANTS  
RELATED TO SELECTION CRITERIA**

## Effect of Group Responses Upon Selection Criteria.

F-ratio for Multivariate Test of Equality of Mean  
Vectors = 1.83      D. F. = 120 and 785.74

P less than .0001

Variable	Between Means Sq.	Univariate F	P Less Than .05
* 1	1.00	6.11	.0002
* 2	0.58	3.57	.0080
* 3	0.46	2.85	.0250
* 4	4.43	9.13	.0001
5	0.62	1.40	.2300
6	0.30	0.85	.5000
7	0.14	1.43	.2600
* 8	0.77	4.96	.0008
* 9	1.25	4.72	.0012
10	0.19	1.63	.1700
*11	1.89	7.33	.0001
12	0.10	1.98	.1000
13	0.19	1.23	.3000
14	0.11	0.97	.4200
15	0.32	2.20	.0700
16	0.60	2.11	.0800
17	0.11	0.85	.4900
18	0.04	0.32	.8700
19	0.03	0.44	.7800
*20	0.61	3.57	.0008
21	0.24	0.51	.7300
22	0.40	1.95	.1000
*23	1.62	4.96	.0008
24	0.37	2.08	.0800
25	0.16	1.20	.3100
26	0.28	0.73	.5700
27	0.41	2.13	.0800
*28	6.01	7.62	.0001
29	0.71	2.36	.0543
30	0.20	1.00	.4100

Degrees of Freedom for Hypothesis = 4

Degrees of Freedom for Error = 226

\*Significant at P less than .05



Distribution of Mean Scores for Each Criterion Disagreed Upon by the Five Groups.

Criterion	Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers	Grand Mean
1	1.03	1.04	1.00	1.19	1.32	1.12
2	1.18	1.04	1.20	1.06	1.26	1.15
3	1.03	1.05	1.10	1.14	1.24	1.11
4	1.64	2.02	1.90	2.03	2.42	2.00
8	1.00	1.02	0.90	1.06	1.24	1.04
9	1.24	1.19	1.10	1.08	1.45	1.21
11	1.24	1.14	0.90	1.39	1.52	1.24
20	1.12	1.07	1.10	1.08	1.29	1.13
23	1.18	1.28	1.10	1.08	1.51	1.23
28	1.09	1.18	1.30	1.25	1.83	1.33
29	1.21	1.35	1.10	1.41	1.48	1.31
Degrees of Freedom for Hypothesis = 4      Significant P less than .05						

Distribution of Mean Scores for Each Criterion Agreed Upon by the Five Groups.

	Criterion Principals	Supervising Teachers	Center Directors	Clinical Consultants	Student Teachers	Grand Mean
5	2.33	2.46	2.70	2.67	2.53	2.54
6	2.64	2.67	2.80	2.80	2.80	2.74
7	1.00	1.00	1.00	1.06	1.11	1.03
10	1.03	1.05	1.00	1.06	1.16	1.06
12	1.00	1.00	1.00	1.00	1.08	1.02
13	1.09	1.14	1.10	1.08	1.22	1.13
14	1.12	1.07	1.00	1.08	1.16	1.09
15	1.03	1.11	1.00	1.14	1.22	1.10
16	1.36	1.14	1.30	1.44	1.33	1.31
17	1.09	1.12	1.00	1.11	1.18	1.10
18	1.06	1.10	1.00	1.11	1.09	1.07
19	1.03	1.05	1.00	1.08	1.08	1.05
21	1.97	1.84	1.90	1.75	1.89	1.87
22	1.15	1.19	1.00	1.11	1.29	1.15
24	1.03	1.14	1.00	1.06	1.22	1.09
25	1.03	1.07	1.00	1.08	1.16	1.07
26	1.70	1.61	1.60	1.78	1.77	1.69
27	1.06	1.16	1.10	1.33	1.24	1.18
30	1.15	1.14	1.20	1.11	1.25	1.17

Degrees of Freedom for Hypothesis = 4

Significant P greater than .05

**APPENDIX D**

**CRITERIA CONSIDERED TO BE BASIC, FUNDAMENTAL REQUIREMENTS  
BY A MAJORITY OF THE RESPONDENTS THAT PARTICIPATED IN  
THE MICHIGAN STATE UNIVERSITY CLUSTER PROGRAM OF  
STUDENT TEACHING, FALL TERM, 1972**

CRITERIA CONSIDERED TO BE BASIC, FUNDAMENTAL REQUIREMENTS  
FOR SELECTING CLINICAL CONSULTANTS

- Possess the level of academic preparation required by state certification laws.
- Have completed at least three years of successful teaching experience.
- Possess a bachelor's degree.
- Participate in the program willingly and look upon supervising the growth of student teachers as a contribution to the profession.
- Demonstrate or has demonstrated ethical principles in guiding his actions.
- Be recommended by his or her administrators, co-workers and by the student teaching staff of the teacher education institution.
- Possess the ability to diagnose, analyze, and evaluate the behavior of children, student teachers, and himself.
- Demonstrate that his or her work is the result of organized planning based on well defined objectives.
- Reflect a positive professional attitude and a real liking and respect for teaching.
- Be able to establish a feeling of security on the part of student teachers by clarifying his responsibilities throughout the student teaching period.
- Be able to demonstrate and understand the basic principles of effective teaching and learning.
- Be able to exhibit a cooperative attitude in relationships with other members of the staff.
- Have worked with student teachers and acquired a basic understanding of the responsibilities of a supervising teacher.
- Be enthusiastic regarding the role of clinical consultant.
- Be able to consider new and different teaching techniques in an open-minded manner.

- Be able to help student teachers to develop understanding of their strengths and weaknesses and foster in them a healthy self-concept.
- Be able to utilize conferences with student teachers as a form of teaching and learning through discussion.
- Be capable of working with the student teachers and building staff in developing individual participatory schedules based on diagnosed needs of the student teachers in the building.
- Shows willingness in providing classroom supervision of student teachers in the building in cooperation with regular classroom teachers.
- Be able to help the student teachers in the building on such matters as lesson planning, discipline, and human relationships, which are called for by the objectives of the courses they teach.
- Be capable of taking corrective measures which will improve difficult situations.
- Be able to demonstrate an acquaintance with the literature of his or her professional field.
- Have developed an appreciation for people who are different in culture, racial, religious, economic, and national background, and is willing to accord them full equality of opportunity.
- Set positive example for student teachers in personal appearance and hygiene, grooming, speech, and habits.
- Be able to utilize recent developments and trends in the teaching profession.
- Have an understanding of the program, personnel, and problems of cooperating schools, especially at the level where he or she is the clinical consultant.