Stony Brook University

DEPARTMENT OF PSYCHOLOGY

Substantial Direct Instruction (SDI) Evaluation Form

(Student Name)

☐ has satisfactorily completed

☐ has not successfully completed

one semester of substantial direct instruction under my supervision for:

Semester:_____Course Number:_____Course Name:

Supervising Faculty Name (Instructor of Record):

Observing Faculty Signature Date

On a separate sheet, please provide written feedback on the student's performance as an instructor. These comments should be provided to the student instructor as well.

Note: If this SDI is for PSY 310, observations and feedback should be provided by the student's advisor (or other faculty observer, as identified in the SDI Pre-Approval Form).

Students should remember to download their teaching evaluations, if available, and attach those to this form. This information can help students build a strong teaching portfolio.

SDI resources and materials may be found on the Psychology Website by searching "SDI"

Director of Graduate Studies Date