Collaborative Clinical Practice:
An Alternate Field Experience

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Introduction

Teacher education in the 21st century is encountering increased scrutiny, added pressure, and escalating external regulations but does not have practical and immediate solutions for improving programs. While reforms in teacher education call for additional and improved clinical practice for candidates, through strengthened partnerships with local schools, the relationship between higher education and P-12 institutions often remains complicated and weak. Further, the current economic climate, coupled with increased pressures on local school administrators, continue to make secured placements for clinical practice extremely difficult to find and works against the intent to meet state and national requirements for teacher education programs to improve relationships with neighboring schools. With accrediting organizations and regulations that direct teacher education programs to expand relationships with the schools in which candidates are placed, teacher educators find themselves caught between the long-term work of developing formalized university-school partnerships and the immediate objective of improving the clinical practice experience for candidates.

Personnel in placement offices endeavor to secure assignments for clinical practice and, due to a shortage of placements, candidates often

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accept any placement offered. While all teacher educators would prefer excellent cooperating teachers, and many are exemplary, candidates may end up under the tutelage of in-service teachers who do not model strong teaching methods. While teacher educators are acutely aware of this, just as they are aware that not all candidates have optimal preparation to begin clinical practice, a shortage of placements means that not all candidates will learn under the best conditions. An excellent clinical experience depends on several factors beyond the cooperating teacher's professional skills, including the dispositions of the cooperating teacher and the attitude and preparation of the candidate as well as compatibility of personalities. Ensuring quality learning of teacher candidates within the clinical practice becomes a challenge for professors, university supervisors, and cooperating teachers if one of the many factors falls short in expectations. Additionally, in cases where strong relationships do not develop between the candidate and cooperating teacher due to factors such as personality incompatibility, the absence of meaningful teamwork deprives the candidate of an opportunity to develop a critical 21st century skill: collaboration.

In response to the difficulty of finding clinical practice placements, and in an attempt to improve the clinical practice experience for candidates, the researcher paired teacher candidates during their first clinical placement. The goal was to analyze how a collaborative approach affected learning and the candidates' perceptions of the support that they received during the practicum experience. The candidates, all adult students in an MAT program, received clinical assignments through the placement office, based on authorization level, and were placed with any cooperative teacher in the field who agreed to take two student teachers at one time for a part-time placement. The primary purpose of the study was to develop an alternative model of clinical practice that would result in increased candidate learning and support. Pairing teacher candidates (dyad) in one placement allowed them to learn from each other and to receive support through feedback and encouragement.

Literature Review

Models of clinical practice vary across educator preparation programs and include professional development schools (Baker, 2011; Cozza, 2010; Darling-Hammond, 1994, 2005; Levine & Churins, 1999; Rutter, 2011; Teitel, 2001; Wong & Glass, 2011), co-teaching (Bacharach, Washut Heck, & Dahlberg, 2010; Kamens, 2007), and configurations that place preservice candidates in small groups or pairs (Baker & Milner, 2006; Birrell & Bullough, 2005; Gardiner & Robinson, 2010; Goodnough, Os-

mond, Dibbon, Glassman, & Stevens, 2009; Hamman, Fives, & Olivarez, 2007; Lu, 2009). While the studies evaluate the merits of each model, the prevailing theme in each study remains the significance and benefits of collaboration as a skill and as a way in which preservice teacher candidates learn within the clinical practice experience. The learning of preservice candidates also receives attention in the work of Shabani, Khatib, and Ebadi (2010), who also confirm the importance of collaboration and substantiate its significance through an examination of Vygotsky's (1978) zone of proximal development as it relates to teacher education.

Because educators believe that a supportive and encouraging environment leads to greater learning, the establishment of a collaborative community has become a focus of many teacher education programs and, thus, much research. Parks (2009) studied collaboration among preservice teachers, but in the context of a research course rather than in clinical practice. Interestingly, the results of this study, albeit limited to coursework, suggest that collaboration hindered candidates' abilities to think critically about basic assumptions of teaching. Further, Fendler (2006) argues that a community of practice, in which collaboration takes place, excludes some candidates. In contrast, Shagrir (2010) emphasizes the importance of collaboration within a professional support group to enhance the pedagogical practice of teacher candidates, and the results of Branyon's (2008) study of a peer mentoring program support the cohort model of collaboration as a way to improve teacher quality. Additionally, Stairs (2010) conducted a case study in which the author found that preservice teachers who were paired for clinical practice, within the context of an urban setting, improved their professionalism, and Cozza (2010) maintains that collaboration enhances classroom culture and, thus, learning. Despite the existence of such studies, Wong and Glass (2011) noted that the research on the association between student learning and collaborative models of clinical practice is limited.

Birrell and Bullough (2005), in an attempt to better understand the clinical practice experience for teacher candidates, studied ten elementary education students who were paired for a practicum. These researchers found that the use of this model of clinical practice resulted in candidates' learning to appreciate collaboration with colleagues and in their being well prepared for solo teaching. Baker and Milner (2006) compared five candidates placed singly to four pairs of candidates in partnered placements to determine how they learned from their mentors. The results indicated that paired candidates experienced more learning.

In yet another in-depth qualitative study, Goodnough et al. (2009) followed four pairs of candidates to determine the benefits of pairing candidates. Goodnough found that teacher candidates placed in clinical

practice with another preservice candidate gained professional experience through collaboration with and learning from a peer. Finally, Gardiner and Robinson (2010) studied three pairs of candidates to determine their perceptions of how collaboration works in such an arrangement. The results of these studies indicate the benefits of pairing teacher candidates within the clinical practice component of teacher education programs.

While few studies control for factors such as the degree of collaboration (Wong & Glass, 2011) researchers continue to examine methods to improve field experiences through collaboration (e.g., Martin, Snow, & Franklin Torrez, 2011). Kamens (2007) studied a variation of a collaborative model and interwove co-teaching with paired candidates to analyze the experiences of special education and general education candidates teaching collaboratively with a team of cooperating teachers. Kamens found that candidates used each other to build knowledge about professional practice in a collaborative and reflective manner, and they experienced a high degree of comfort and confidence within the placement due to the presence of a peer. Kamens' findings support the use of collaborative models in clinical practice.

There is inconsistency in the terms used for groups of professionals within the clinical practice experience. While some refer to a triad as a single preservice teacher, a cooperating teacher, and a supervisor all working together (Henry & Beasley, 1996), a triad also can mean two candidates paired with one cooperating teacher (Gardiner & Robinson, 2010; Goodnough et al., 2009). In this research, I use the term dyad to denote the pair of candidates because the clinical practice centers on the collaboration between the two candidates rather than on the dynamics between the candidates, cooperating teacher, and supervisor.

Research Design

The primary purpose of this study was to determine whether an alternative collaborative model of clinical practice enhances clinical practice and leads to increased candidate learning and support. The primary research question was: How does a collaborative paired placement during the clinical practice component of a preservice teacher education program affect candidate learning and development?

Context

The MAT program in which the study took place uses a cohort model, and, during the course of this study, I served as the cohort professor for the participating candidates. Candidates in the program meet with their cohort professor regularly throughout the program, starting with the

first course taken. Candidates begin taking courses in June and enter the clinical experience in late August. Candidates have two clinical placements, one for each authorization level. A shorter, part-time placement satisfies the clinical requirements for the second authorization and takes place between August and December. From August through November, candidates attend courses on campus Monday through Wednesday and spend Thursday and Friday in the placement. In mid-November, candidates begin teaching in the placement on a full-time basis and work until the winter break, when the placement ends. During this time, the candidates teach the first work sample (Denner, Norman, & Lin, 2009; Fredman, 2004). The study took place within this placement.

Shortly after beginning the MAT program, candidates who participated in this study received a letter that informed them of the collaborative clinical practice program and named the partner for the placement. By that time, the candidates knew each other from taking courses together over the preceding few weeks. In August, I gave the candidates and their supervisors literature and a list of suggestions for making the most of the collaborative approach in the classroom. Because the candidates were all in the same cohort, they met with me regularly, and I was able to monitor their progress as they worked in their dyad. Further, the university supervisors who observed the candidates in their placements submitted regular reports on the candidates' progress.

Participants

The 12 participants were graduate students in an MAT program at a private university in the Pacific Northwest. Participants ranged in age from early 20s to early 50s and included three males and nine females. Because the goal was complete participation in this pilot program, students were not given a choice to participate in a dyad for clinical practice, nor did they have an opportunity to choose partners. All clinical practice assignments were made through the placement office, based upon candidate authorizations and those cooperative teachers in the field who agreed to take two student teachers at one time for a part-time placement. Students were paired randomly, but had common license authorization levels. The number of cooperating teachers who agreed to such a placement determined the sample size. Four dyads were placed in elementary schools and two were placed in middle schools. Those placed in middle schools taught math and Spanish classes.

Process

The development of a trial program that uses dyads in clinical practice, as an alternative to the traditional student teaching model, precipitated

this case study. The university has three different MAT programs spread over five different locations. For this grounded research study, students in one cohort were placed in a dyad for the first authorization practicum. At this university, the shortage of available placements triggered an investigation into ways to simultaneously increase meaningful candidate learning while alleviating the strain on schools and the placement office to produce practicum assignments for candidates in this MAT format. The decision to pair candidates in clinical practice was made following an investigation of the benefits of co-teaching (Bacharach et al., 2010), and after studying Gardiner and Robinson (2010) and Birrell and Bullough's (2005) research on candidate pairs. The present study, however, used a larger sample of participants and sought to determine the perspectives of candidates in regard to their learning and perceived support in a paired situation as well as the perspectives of the cooperating teachers and the supervisors on the arrangement in terms of candidate learning and how the pairs influenced their work.

Potential cooperating teachers received letters that presented the rationale for the trial program and that outlined the expectations for all parties involved. Following the foundational work, the placement administrator found 12 students in the cohort who had common authorizations and then worked to find pairs of students a placement with one cooperating teacher. It is important to note that the cooperating teachers received stipends for each candidate. Candidates received a letter of consent that presented the purpose of the study and distinguished it from the purpose of the trial program. The candidates in the trial program who agreed to have their experiences studied for publication understood that no names or identifying information would appear in any reports or papers. Cooperating teachers and university supervisors also received a letter of consent and understood that all data collected would remain confidential.

University supervisors received the same information given to the cooperating teachers, and, during an orientation meeting, the supervisors and candidates met to discuss the arrangement and expectations. Candidates were asked to observe each other's teaching and to provide regular feedback. They also were required to observe alongside the university supervisor and to participate in the post-observation conference. The resources given to supervisors and candidates included suggestions for co-teaching, ways to observe each other and to provide feedback, and ideas for how to collaborate on planning.

As with the Birrell and Bullough (2005) and Gardiner and Robinson (2010) studies, specified requirements for collaboration were not part of the pilot program; rather, the candidates, cooperating teachers, and

university supervisors were free to adjust and interpret as necessary to meet the needs of the candidates. Weekly course meetings provided me with regular opportunities to meet with the candidates and to inquire about progress and concerns. Additionally, I met with two cooperating teachers who had questions about how to work with two candidates at one time. University supervisors observed both candidates when they visited schools and arranged to consult with them following the observations, much like a traditional practicum, but with two candidates at one time.

Data Sources

During the semester in which the dyads were together for clinical practice, I saw the participants, who also were my students, on a weekly basis. These participants had class with me for four hours each week over the course of the 10-month MAT program. Through discussions and informal interviews, I gathered data to analyze and evaluate the pilot program. I kept a digital file in which I made notes in regard to the progress of the trial and comments and issues raised by the participants. Then, at the end of the semester, the candidates received a survey questionnaire on which they were asked to rate specific features of the trial as well as to provide narrative data on their attitudes and perceptions about teaching in pairs and about their learning. Specifically, candidates rated on a 5-point Likert scale the degree to which they felt that working with a partner supported their learning during the clinical experience. They also were asked to provide information on how they worked with the partner, the ways in which they collaborated, how often they watched the partner teach, how each provided feedback, and how the placement might have been different had they taught alone.

To gain a second perspective on the effectiveness, benefits, and disadvantages of such candidate groupings, cooperating teachers completed a survey at the end of the placements. University supervisors, who supervised the dyads, provided a third perspective on the trial program through a survey questionnaire specific to them. Cooperating teachers and university supervisors rated the experience in terms of the benefit to candidate learning. They were asked to describe how the candidates collaborated, data that I compared to the data gathered from the candidates. Additionally, the supervisors and cooperating teachers were asked to provide information about how they worked with the dyad. One of the most important questions was reserved for the cooperating teachers; they were asked whether working with two candidates improved the learning for the classroom students.

Limitations and Delimitations

Both a limitation and delimitation, the study involved only candidates from my cohort. I chose to keep the trial program small to study the outcome before extending the model to other cohorts. To observe how students collaborated naturally, the candidates were purposely given little guidance on what was expected in terms of collaboration. While the limitations of the study include my personal relationship with the participants, it should be noted that this relationship also allowed for honest and blunt feedback regarding the program. Additionally, the university supervisors are adjunct faculty members, and their relationship to the university may have biased them positively toward the trial.

Data Analysis

All students, cooperating teachers, and all but one university supervisor returned the completed surveys. The high return rate provided ample qualitative data to analyze to determine the effectiveness of the dyad model for clinical practice. The first step in this grounded theory research (Birks & Mills, 2011; Creswell, 2013; Glaser & Strauss, 1967) involved reading the candidate surveys and recording their ratings of the experience as related to learning. Next, the narrative data were analyzed and coded (Glaser & Strauss, 1967), with the purpose of looking for themes within the text that supported or refuted the success of pairing of candidates for clinical practice. Once the candidate surveys were read and analyzed, the surveys from the cooperating teachers and university supervisors also were read and coded according to common themes that emerged from the responses. Many questions on the survey asked for yes/no answers as well as for explanations, so data analysis did not require analytical software, but electronic copies of all work allowed me to move text and categorize according to themes.

Finally, all formal practicum evaluations of candidates were read to ascertain whether goals were met and skills were mastered during the placement. These data were not used analytically to refute or support the dyads, specifically, but rather used as another perspective into candidate growth. Evaluations were read to learn about student progress and to ensure that all candidates progressed at rates comparable to their colleagues in traditional placements. These candidates may have performed equally as well if they had worked alone during the practicum, so high evaluations could not directly or singularly point to the dyad as the cause for high marks.

Findings

Student Perceptions

Candidates were asked to rate the dyad experience on a scale of 1 to 5 in terms of its helpfulness to their learning. Of the candidates, 50% (6) gave the trial the highest score of 5. Two candidates rated the experience as a 4. Three candidates rated it as a 3, and the remaining candidate rated the experience as a 2. Alone, the numbers suggest a modestly successful trial, with 8 of the 12 participants' providing high ratings, and 4 rating the model at 3 or below. The final question on the survey was, "Do you think working with a partner enriched this experience? Answer and explain." Every candidate replied in the affirmative. This question, along with the explanations discussed in the following paragraphs, indicates that this is a successful and worthy model for clinical practice.

The candidates who gave the dyad trial scores of 2 or 3 contributed narrative data that did not support the rating. For example, the candidate who rated the experience as a 2 qualified the score with an explanation that the rating was based not on the dyad model but, rather, on the partner with whom the candidate worked, as this candidate felt that the partner did not contribute to learning. During the trial, this candidate was able to alert me to the trouble that her partner experienced in assimilating into the professional environment at the school. In this case, early intervention was possible, but the skills of the candidates differed to the extent that the stronger candidate became a second coach and mentor who did not receive the expected feedback sought in a practicum experience. The candidate wrote, "I wish I could have given better reviews of the dyad idea. I think it is a good idea, just with partners with more similarities." Interestingly, the partner rated the experience as a 4.

One candidate who rated the experience as a 3 wrote, "By nature, I am independent, and working collaboratively so constantly in the MAT program is something that has forced me to have great patience, understanding, and tolerance." The same candidate also wrote:

> When I found out that I was going to be pair teaching, I was actually quite upset. I am paying a lot of money to the university to get my degree, and I would like to have the best possible chance to become a better teacher.

Putting aside concerns about the candidate's disposition, the final remarks stood in contrast to the former: "I am thankful my partner and I got to work together. We did learn from each other and I did learn more about how I may or may not teach from having two people to observe instead of one." Interestingly, this candidate also contributed many com-

ments about having high-quality discussions with the partner centered on teaching and learning.

The other candidate who supplied a rating of 3 wrote, "My personal preference has long been to work alone." The candidate went on to write, however, that "there are obvious advantages to having multiple adults—particularly trained adults—in the classroom."The descriptions that followed concerned the myriad ways that this dyad worked together for the benefit of the students in the classroom. Again, a candidate recognized the independent nature of his or herself and used this as a measure of the trial success. Each candidate who scored the experienced below 4 acknowledged the benefit of collaboration but had enough self-awareness to admit and express apprehension about working with another person in the classroom. Those in educator preparation might find such a disposition more disturbing than the data on the dyad trial.

Following the candidates' ratings of the experience, they provided written comments that centered on five themes: collaboration, relationships, reduced stress and anxiety, increased feedback, and learning. Candidates made comments about the value of collaboration that included the following:

> I think working with a partner enriched this experience because we were able to collaborate daily and bounce ideas off each other.
>
> Working with a partner gave me an additional perspective, an opportunity to work as a team, and someone to share in the experience.
>
> My partner and I would collaborate on the first sections of our work samples and we discussed every student.
>
> We would often collaborate when we were planning to teach.

Collaboration and the importance of working in a team, as an essential part of 21st century teaching and learning, is understood by this generation of teachers, even those for whom independent work brings greater comfort than does cooperative teaching.

A surprising outcome in this study was the impact that the dyad had on other relationships within the clinical practice. Several candidates commented that they developed deep friendships with their dyad partner, but relationships with the cooperating teacher and students, as a result of the candidate's having a partner, came as an unexpected benefit of the trial. Candidates wrote:

> We were also able to collaborate about the students and I feel I know them better because there were two of us there.
>
> If I had been alone, I don't think I would have bonded as much with my cooperating teacher.

> This model made it easier to get to know the students faster.
>
> Without my partner, I don't think I would have known the kids as well, which I would not have liked.

Only one candidate expressed any negative feelings related to relationships and was in the dyad in which the student preferred to work alone. Grounded in the notion that adults learn in community, the concept of partnered clinical practice has a solid foundation, but the extension of the concept to the candidates' interrelationships with students and the cooperating teacher provides additional evidence of the trial's success.

The ultimate goal of the trial was to increase candidate learning and performance. Aside from looking at formal evaluations by the cooperating teacher and university supervisors, an inaccurate measure for this study due to reasons that relate to inter-rater reliability and interpretations of scores and rubrics, I relied on an analysis of what happened during the placement in the area of feedback and how candidates collaborated. All the candidates in the study regularly observed their partners and provided feedback following the lessons. With the exception of the candidate who was paired with a partner who needed remediation in methods and planning, all candidates reported gaining valuable information about their practice from the feedback. Comments included:

> Every time my partner offered feedback, she wrote about my strengths and weaknesses. It was most helpful when she would mention areas that I needed to work on, because most of the time I did not see these weaknesses in my lesson.
>
> I always provided feedback for my partner. The students were learning the objectives and it was important for me to let her know that she was not floundering.
>
> The most helpful feedback was concrete examples on how to improve.
>
> My partner encouraged me to have more confidence while teaching.
>
> I was able to evaluate my teaching with another new teacher so I was able to evaluate my own strengths and weaknesses better.
>
> I also found it helpful to be able to watch and see how my partner was doing something, and be able to use that in my own teaching. Learning from each other as we went along was one of the best parts of this experience.
>
> My partner catches the little things that I may not notice when addressing the entire class.

Once again, every candidate expressed that the dyad model enriched

the experience, and the comments confirmed that the trial was of great benefit to those involved.

Every candidate in the study commented on the stress of beginning a clinical experience placement. The written responses on the survey clearly depict a component of the practicum perhaps reduced or dismissed by teacher educators as a possible inhibitor of success in the placement. Candidates provided such comments as:

> It made this first student teaching experience less stressful and I did not have anxiety about being alone with a cooperating teacher.
>
> The first time you enter a classroom as a student teacher, it can be very nerve racking; however, having someone else going through the same things with you makes it much easier.
>
> If I had been alone, the first days would have been very nerve wracking and uncomfortable. I liked having a wingman when diving into unknown territory.
>
> [If I had been alone] it would have been so much more stressful in the beginning.
>
> When you are going to a foreign place, it is nice to have someone you can always talk to.
>
> Great moral support to have a partner right there to back you up.
>
> It was very comforting to have my partner right there.
>
> I think that this placement would have been different if I had been alone because I would not have had the comfort zone at my school when we first began.

As indicated in the field of pedagogy and andragogy, emotional security is a prerequisite of learning (Clough & Halley, 2007). The evidence collected in this study demonstrates that the trial provided a sense of security and reduced stress, which allowed candidates to feel comfortable in the clinical experience and, thus, might account for all candidates', except one, receiving high scores on the formal practicum evaluations by cooperating teachers and university supervisors. As noted, I did not use evaluation scores as an indicator of program success but, rather, as a set of data by which comparison to other data opened the way for an informed determination about the success of the trial. It was candidate comments that largely and conclusively supported the use of dyads in clinical practice.

University Supervisor and Cooperating Teacher Perceptions

University supervisors serve as critical partners in the clinical prac-

tice and provide the link between the school site and the university in addition to providing candidates with valuable feedback on their growth as teachers. Their input and perceptions of the trial were instrumental in my forming conclusions about the trial. Survey questionnaires sent to these participants were shorter than those sent to cooperating teachers and required fewer narrative explanations, although many were offered and written in the margins of the survey, which demonstrated enthusiasm about providing feedback about the trial. The rating of the trial by both cooperating teachers and supervisors mirrored that of the candidates. In fact, those who rated the experience lower than a 4 were those who worked with the candidates who had unequal skills or who preferred to work alone. The supervisors and cooperating teachers for these students recognized the value of the model but indicated that it was not ideal for these few candidates. After reading the comments from these particular candidates, I wondered whether the teaching profession will prove rewarding for those who wish to work alone, given the demands for collegiality and collaboration in the field. Regardless, the data provided by these professionals overwhelmingly supported the use of dyads in clinical practice.

Both the cooperating teachers and the university supervisors were asked whether the dyad doubled the work for these participants. All replied that it did not double the work. In fact, supervisors stated that they appreciated the ease of having two students in the same location, and two supervisors commented that they also learned in the process by listening to the feedback that candidates gave each other. Both groups were asked whether they would work with a dyad again, and all replied in the affirmative.

The last two questions asked of both groups appear similar but are nuanced to confirm opinions on candidate learning. The groups were asked whether they believed that the trial program enriched the experience for the candidates and whether the experience increased candidate learning. All of the participants replied that the dyad model enriched the placement experience, and all but one said that it increased candidate learning. That one dissenting supervisor explained that the dyad increased the learning for one candidate in the partnership (the one who needed remediation) but that the other candidate in this dyad did not receive the benefits that others did because the partner was unable to provide meaningful feedback. In this case, the high-performing candidate relied only upon the supervisor and the cooperating teacher for mentoring.

The final question was asked only of the cooperating teachers: Did the dyad increase student learning? All teachers answered in the affirmative. Because the overall goal was to increase candidate learning,

with student learning assumed, the question did not specify that the cooperating teachers elaborate or explain the answer. Nevertheless, three cooperating teachers wrote that they appreciated the additional adult in the room because more students received individualized assistance. While these busy professionals did not supply a large quantity of narrative responses, what they did write indicates that they were clearly in favor of working with two candidates and that they acknowledged the value for both the candidates and the students. The data collected directly point to the benefit of the dyad model in terms of candidate learning within clinical practice experiences. As one cooperating teacher stated, "They learned twice as much, as they learned from each other's mistakes as well as mine."

Summary and Conclusion

Preservice teacher candidates worked together with the cooperating teacher to discuss planning, teaching, and evaluating students. Candidates observed the cooperating teacher, and the candidates debriefed each other and the cooperating teacher following these observed lessons. They discussed topics such as methods, management, student engagement, pacing, remediation, and differentiation. The candidates worked together to write units of instruction. Each took responsibility to teach some lessons, co-teach others, and, at times, act as an assistant. The candidates observed each other's teaching and gave feedback and suggestions, along with the cooperating teacher and university supervisor also giving feedback and suggestions. Candidates tried technology that they might otherwise have dismissed because they had a support present, and this reduced the fear of risk taking. Within the classroom, candidates modeled collaboration for the students and increased their own skills in the area of teamwork.

While I like to think that every candidate is superb, we sometimes have students who need a little extra coaching. If this occurs in collaborative pairs, the stronger student serves as a role model and another voice in the areas in which the partner needs to make changes. This appeared to serve as a benefit to the cooperating teachers in such cases. In this trial, candidates were paired before we knew them, so personality was not a factor in the dyads formed. Perhaps other institutions might consider forming dyads based on candidate choice and skill level. Regardless of dyad formation, each candidate must work well others, as this ability is critical for educators. If a candidate does not work well with a dyad partner, most likely other issues need attention by professors and supervisors, and those issues would surface whether or not the candidate did clinical practice in a dyad.

With the increasing difficulty in securing the number of placements needed for preservice teacher candidates, sustaining professional development schools, and establishing lasting partnerships with districts, the dyad model for clinical practice, which increases candidate learning and benefits cooperating teachers and students, offers a viable alternative to the traditional student teaching placement. Evidence collected during this trial supports the dyad as highly beneficial to both students and candidates. The ultimate goal for the candidates was to increase their learning and to help them feel prepared for the second long-term placement, where expectations include independently teaching while managing volunteers and classroom assistants. Candidates experienced success in this model of clinical practice, and it proves worthy of notation as a viable practice for increasing learning in the practicum experience. The results of this trial lend assurance to institutions that the model has little risk and excellent potential to increase candidate learning and performance. As seen below, the candidate implemented the learning into teaching performance.

> I absolutely loved having a partner for this first placement. If I would have been alone, I do not think I would have learned as much because I would have only been observing an in-service teacher, but being able to observe a pre-service teacher like myself helped me see strategies I liked that she used, which I implemented myself.

Increased candidate learning expressed through improved classroom practice improves the clinical placement experience for preservice teachers. Further, observations of the application and implementation of professional knowledge gained during clinical practice provide educator preparation programs with evidence that these placements remain crucial to the formation of exemplary educators.

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