

STUDENT TEACHING TIME CARD & RECORD OF ATTENDANCE

MUST COMPLETE IN BLUE INK

STUDENT NAME (Last, First, Middle): _____										STUDENT ID: _____											
LOCAL ADDRESS (NO., STREET, APT.): _____										CELL PHONE: _____					HOME PHONE: _____						
CITY: _____			STATE: _____			ZIP: _____				EMAIL ADDRESS: _____											
STUDENT TEACHING PLACEMENT INFORMATION:										SEMESTER ENROLLED IN:											
GRADE LEVEL(S): _____ CONTENT AREA: _____										<input type="checkbox"/> Fall <input type="checkbox"/> Spring Year: _____											
DISTRICT: _____										SCHOOL(S): _____											
MENTOR TEACHER NAME: _____										UNIVERSITY SUPERVISOR NAME: _____											

Must complete in blue ink.	RECORD ALL DAYS WORKED ONCE STUDENTS START: 75 Days/15 Weeks is the minimum required by the state.																			
	Example:	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Week 17	Week 18	Extra Days Worked
Monday	8/6																			
Tuesday	8/7																			
Wednesday	8/8																			
Thursday	X																			
Friday	8/10																			
Total days present this week	4																			
Mentor's Weekly Initials	WN																			

This side is to be filled out by University of Arizona Supervisors and Faculty.

Supervisor Classroom Observations	
Date	Supervisor Initials

Supervisor/Cooperating Teacher/ Student Teacher Conferences		
	Date	Supervisor Initials
Initial		
Midterm		
Final		

University Seminars	
Date	Supervisor/Prof Initials

Student Teaching Dates	
	Supervisor Initials
Beginning Date: _____	
Ending Date: _____ <i>(Must be a minimum of 75 teaching days)</i>	

Required for All Student Teachers		
	Date	Office of Field Exp. Initials
Student Teacher Professional Development Conference, Part I		
Student Teacher Professional Development Conference, Part II		
Career Advisement Session		

<i>Portfolio Grade:</i>	<i>PASS</i>	<i>FAIL</i>	<i>Final Student Teaching Grade:</i>	<i>PASS</i>	<i>FAIL</i>
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Sign at the end of the student teaching semester to certify the information on this card is true and accurate:

Student Teacher _____

Date: _____

Mentor Teacher _____

Date: _____

University Supervisor _____

Date: _____