

## STUDENT TEACHING TIME RECORD

***MUST COMPLETE IN BLUE INK***

STUDENT NAME ( <i>Last, First, Middle</i> ):										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: _____ CONTENT AREA: _____										<input type="checkbox"/> Fall <input type="checkbox"/> Spring    Year: _____											
DISTRICT: _____										SCHOOL(S): _____											
COOPERATING 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. In blue ink each day, put the date you are present or an "X" to indicate an absence. For school holidays, write which holiday in the square. Missing half a day equals an absence. Cooperating teachers: each Friday, initial at the bottom of the week to verify the student teacher's attendance.																			
	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	<i>8/6</i>																			
Tuesday	<i>8/7</i>																			
Wednesday	<i>8/8</i>																			
Thursday	<i>X</i>																			
Friday	<i>8/10</i>																			
Total days present this week	<i>4</i>																			
Cooperating Teacher's Initials	<i>WN</i>																			

This side is to be filled out by University of Arizona 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		
Arts Education 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>
-------------------------	-------------	-------------	--------------------------------------	-------------	-------------

Sign at the end of the student teaching semester to certify the information on this card is true and accurate:

Student Teacher \_\_\_\_\_

Date: \_\_\_\_\_

Cooperating Teacher \_\_\_\_\_

Date: \_\_\_\_\_

University Supervisor \_\_\_\_\_

Date: \_\_\_\_\_