Form III

Verification of 45 hours of observation – Early Field Experience

Student Name:	Student ID:
Goals of Early Field Experience: The main purposes of (1) the texts and instructional materials used in schools; 2 interactions; 4) the grouping of students for instruction; teacher; 6) the planning and delivery of lesson plans; and	2) the student interactions; 3) the student/teacher 5) the classroom management strategies used by the
Option 1:	
Observation in schools: Attach letters on school letterh verifying your observation time. The letters need to include the time you spent at the school site (i.e., from MM/DD/observed and total number of hours. Documentation is selection and Review Committee.	lude your name, the beginning and end dates of YYYYY to MM/DD/YYYY), grade level
Option 2:	
If you completed a college course that required field experience attach a catalogue description that shows the number of hours required. If there is no catalogue description showing the number of hours, you must get a signature from the course instructor. (Attach additional verification of course information if needed)	
COURSE NAME AND NUMBER:	
SEMESTER AND YEAR TAKEN:	
GRADE LEVEL OBSERVED:	
NUMBER OF HOURS OF OBSERVATION:	
PROFESSOR'S PRINTED NAME:	
PROFESSOR'S SIGNATURE:	
CREDENTIAL SERVICES OFFICE USE ONLY:	
Credential Program Coordinator Verification: (Please initial)	
Approved	
Denied	