

## Early Field Experience Log Sheet

Teacher Candidate's Name		C#	Major		
Cell Phone  Required Field Work Hours	E-mail		Course		
Required Field Work Hours	Course Instructo	or	Semester		
School District/Agency		School Name	Phone		
Host Teacher G		Grade Level(s) or Age	Phone Subject(s)		
First name	Last name				
ATTN: Completing mandated field w	ork hours is required for	completing the course and for	student teaching eligibility.		
(Note	e to students: Please reta	ain copy of completed log shee	et for your records/portfolio.)		
<ul> <li>✓ Host teacher to initial</li> <li>✓ After all field work h</li> <li>✓ Submit to course ins</li> </ul>	tructor at end of the seme	weekly. d, the host teacher signs bottom of the ster with appropriate criteria che	ecked.* (A-F below)  andidate in consultation with his/her host teacher.)		
	A. Ac B. Int C. Hi D. Sc E. EL	cross range of student developmer teraction with parents/caregivers gh Need School (as defined by NY ocioeconomic disadvantaged	nt		
	PLEASE COME	PLETE SCHEDULE ON REV	VFRSF SIDF		
Host Teacher's signature:	. 55 55	Gran	nd Total Hours Date		
eacher Candidate's signature			e entered by host teacher)  Date		
Course Instructor's signature			Date		

Note: Completed form to be retained by teacher candidate's major department for seven (7) years.

Semester: ☐ Fall ☐ Spring 20	Teacher Candidate's Name
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## (Time/hours per day to be indicated below.)

Week of	Monday	Tuesday	Wednesday	Thursday	Friday	Total Hours For Week	Host Teacher's Signature*

<sup>\*</sup>For AVID and LPP Tutoring Programs, multiple Host Teacher signatures are acceptable. Final signatures by all parties and total hours completed must be documented on front side. Thank you.