

FIELD EXPERIENCE LOG SHEET

STUDENT NAME: _____ IPFW COURSE #: _____
(PRINT)

SCHOOL PLACEMENT: _____ INSTRUCTOR: _____
(PRINT)

OBSERVATION RECORD

DATE _____	TEACHER(S) OBSERVED _____	TIME _____
DATE _____	TEACHER(S) OBSERVED _____	TIME _____
DATE _____	TEACHER(S) OBSERVED _____	TIME _____
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DATE _____	TEACHER(S) OBSERVED _____	TIME _____
DATE _____	TEACHER(S) OBSERVED _____	TIME _____

TOTAL HOURS: _____

STUDENT SIGNATURE: _____

COOPERATING TEACHER SIGNATURE: _____ DATE: _____