NORTHWEST FLORIDA STATE COLLEGE

TEACHER EDUCATION
RECORD OF FIELD EXPERIENCE PARTICIPATION

NWFSC Student Name:_____ **NWFSC Course /Section:**_____
NWFSC Instructor's Name:_____ **Academic School Year:**_____
Field Experience Participating School:_____
Cooperating Teacher's Name:_____ **Grade Level:**_____

DATE	SIGNATURE OF STUDENT	TIME IN	TIME OUT	TEACHER'S INITIALS

TOTAL NUMBER OF HOURS:_____ 11/25/08