NORTHWEST FLORIDA STATE COLLEGE

FIELD EXPERIENCE PARTICIPATION TIME SHEET

Directions: ***Please print the information requested in the top portion of this timesheet. Update timesheet each day field experience activities are performed. Use only blue or black permanent ink.***

NWFSC Candidate's Name:

NWFSC Course Number/Section ID:
Field Experience Participating School: _____

Cooperating Teacher's Name: _____

Grade Level: _____ Academic School Year:

Date	Signature of Candidate	Time In	Time Out	Cooperating Teacher's Initials

TOTAL NUMBER OF COMPLETED FIELD EXPERIENCE HOURS: _____

Cooperating teachers should return this form to the course instructor upon the candidate's completion of the field experience.