OFFICE OF FIELD EXPERIENCES
SUNY Potsdam
111 Satterlee Hall
Potsdam, NY 13676

STUDENT TEACHING SCHEDULE FORM

This Form is provided for your convenience. The College supervisor may request that this Form be submitted on a regular basis so that he/she can avoid driving to your school at an inappropriate time. This Form is <u>not</u> to be submitted to the Office of Field Experiences.

Semester/Year: _____
Check Placement: 1 2
Student Teacher: _____
School: _____
Phone No.: _____
Supervisor: _____
Sponsor teacher: _____
Schedule is for Week: _____

TIME	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY