



Field Experience Hours

EDUC 240 field experience hours are P-12 experiences completed by the student **that are not part** of the required field hours for courses. Students **cannot** be paid for these activities.

Section A – Completed by Student						Course:	
Student Name:		MSU ID Number:		Program:			
Proposed Field Experience Activity Description and Estimated Hours (Please include location, date, age of students, and activity supervisor name and contact information)							
Section B – Completed by MSU Program (Hours should not be approved for Rowan County teachers and principals during regular school hours.)							
Approval:		Printed Name:		Date:		Level of Field Experience:	
Section C – Completed by Student							
School District/Organization		School/Organization		Grade/Age	Date of Activity	Start Time	End Time
Nature of Experience – Check all that apply							
English Lang. Learners	Students with Disabilities	Family/youth Serv. Center	Interactions with Family	School Board	Site Based Council	PLC	Tutoring
Assist school personnel	High/Low Socio-Economic Groups	Ethnic/Cultural groups**	**Please write in the racial/ethnic groups at this placement.				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Signature of Activity Supervisor:				*Compensation, in any form, will not be available to providers of approved extended field hours.			
Comments:							
Section D – Completed by MSU Program							
Final Approval:		Printed Name:		Date:			
Please initial to verify the attached reflection meets program expectations _____				Please submit completed documents to Kristie Williams. College of Education Dean's Office. GH 100.			

****A written reflection is required for this activity.**

Revised Fall 2013 - KRW