Field Experience Documentation Form Teacher Education Department, San José State University

To complete the form, please download a copy first. Thank you.

Full Name	II Name SJSU ID:				
teaching credential progr completed through one of school at a grade level ap Subject Program). The fie in-school experience / ob	am. A minimum of 2 or multiple qualifying propriate to your cr ld experience could servation in any sub immer camps, early	20 hours of field experieng experiences. These housedential objective and in also be related to course pject area or out-of-school	nce is required for a urs should ideally be nyour content area ework. Field experie ol experiences, inclu	dired for admission into the SJSU admission. These hours may be a completed in a California public (if you are considering the Single ences could also include ading but not limited to tutoring, a 5 years), faith-based children	
To document your field experience, please <u>download the form</u> and complete one or more of the sections below, whichever are applicable. Electronic signatures (such as Docusign) are accepted. You may add lines to one or more sections of this form as needed to document your field experiences. If you have more field experiences than can be documented on this form, please submit additional forms. Submit field experience documentation forms in Cal State Apply with your other materials.					
Teacher aide / assistant	Teacher or Substitute teacher	Volunteer or Observer	Course work	Alternative experience	
Paid experience as a teacher's aide or teacher assistant in a PK-12 classroom in a public school. The classroom teacher, site administrator, or district administrator may verify this experience, or the applicant may provide a self-attestation. Complete box 2 below.	Service as classroom teacher or a substitute teacher in a public school, as verified by a district or site administrator or as attested to by the applicant. Complete box 2 below.	Working as a volunteer or observing in a PK-12 classroom in a public school. The classroom teacher or site administrator may verify this experience, or the applicant may provide a self-attestation. Complete box 2 below.	I am enrolled or will enroll in or have completed any preparation for teaching course or courses which have field experience built in. Complete box 1 below.	Alternative experience working with children such as working or volunteering in a private school, teaching or assistant teaching at an early childhood education program, tutoring, teaching in an after-school program, outdoor education instructor, ABA therapist, etc. Verification may be from a site administrator or equivalent, or the applicant may provide a self-attestation. Complete box 3 below.	
1. Course Work: In the space below, list the course(s) you have taken, are taking, or are planning to take, if any, which may pertain to field experience (e.g., ARED 150, LSTP 185 (45 hrs), LSTP 85 (20 hrs), CHAD 159, CHAD 160, KIN 172/KIN 178). (Add lines—one per course—as needed.) Obtain a signature and / or include the syllabus or self-attest.					
Course # Course	Title	Institution		Semester / Year Grade	
Description of fieldwork experience, including what school/district/grade level if applicable:					
Total number of field experience hours completed for this course: hours Course Instructor name (print) Signature*					

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*Alternatively, you may self-attest to the above by providing your signature: ______

2. Public School Classroom: Describe the position(s) you held or service you provided (e.g., teacher's aide, substitute, observer, volunteer) in which you observed / worked with students in a public school classroom.						
Title or Service Description (observer, aide, substitute):						
School District:	School Site:					
Subject Area(s):	Date(s) of Service:					
Total number of hours in a public school classroom for this experience: hours						
Supervisor comments about SJSU applicant:						
SUPERVISOR VERIFICATION						
I (print name)vericredential program served as described above.	verify that the above-named applicant to the SJSU teaching am served as described above.					
Supervisor Signature:*	Date:					
Position: Telephone:	Email:					
*Alternatively, you may self-attest to the above by providing your signature:						

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•	tion programs, faith-based	bu provided (e.g., tutoring, after-school programs, d children and youth programming, ABA therapist, setting other than a public school.	
Service Description:			
Service Site:	Date(s) of Service:		
Total number of hours for this experience:	hours		
Supervisor comments about SJSU applicant:			
SUPERVISOR VERIFICATION			
I (print name) credential program served as described abo		above-named applicant to the SJSU teaching	
Supervisor Signature*:		Date:	
Position:	Telephone:	Email:	
*Alternatively, you may self-attest to the abo	ove by providing your sign	nature:	
To the best of my knowledge, the above info	rmation is accurate.		
Applicant Signature		 Date	