Appendix B

MONTGOMERY COLLEGE

School of Education

OBSERVATION TIMESHEET

Student Name:_____School: _____

Host Teacher:_____Supervisor: _____ Semester:_____

Date	Time In*	Time Out*	Total Hours*	Student's Initials	Host Teacher's Initials

Total number of hours: _____

This is to verify that _____ has completed the above hours.
(Student Name)

_____ _____

Student's Signature Date Host Teacher's Signature Date

***Use Increments of 15 minutes ONLY: (Eg, 10:15 am, 12:00 pm, 1.75 hours NOT 10:13 am, 11:54 pm, 1 hr 41 mins)**