PPBOCES/UCCS
Teacher-in-Residence Program
Supervision and/or Observation

(100 hours August through May first year)
(100 hours August through May second year)
Due to TIRP Office: May 22, 2009 and May 21, 2010

<u>Time Log</u>

Name of Resident Teacher______________________________ School_______________________________________

Principal ____ Mentor ____________________________________

Date	**Nature of Supervision/Observation**	**Time Spent**	**Signature/Title of Person Doing Supervision/Observation**

Total of page ___________

Date	Nature of Supervision/Observation	Time Spent	Signature/Title of Person Doing Supervision/Observation
	Total of page		