

MARQUETTE UNIVERSITY
VERIFICATION OF FIRST MEETING AT FIELD SITE

Marquette University field student _____

made her/his first visit to my classroom on _____

(Date)

for _____.

(Number of hours)

(Cooperating Teacher Signature)

(School)

Field student completes this portion and returns form to course instructor by designated due date.

I have made arrangements with my cooperating teacher to report to her/his classroom this semester every week for two hours.

(Day of week)

(Time frame)

(Print name)

(Date)

(Student Signature)