

SB-CEU PARTICIPANT VERIFICATION FORM FOR MDE Fall 2009 – SUPERVISING TEACHER

This form should be completed for eligible participants to receive Michigan State Board-Continuing Education Units (MI SB-CEUs) for participation in the following activity: MDE Fall 2009 – Supervising Teacher

Criteria:

- A supervising teacher must supervise a student teacher/teacher intern for a university/college determined placement period of not less than eight weeks; and
- A supervising teacher must prepare and submit to the building principal and/or the teacher preparations institution's representative an evaluation of the student teacher/teacher intern's performance.

A completed copy of this form along with a copy of the student teacher/teacher intern's evaluation must be filed with the MI SB-CEU sponsor no later than 30 days following the placement period.

PRINT

NAME (First and Last)	LAST FOUR (4) DIGITS OF SOCIAL SECURITY NUMBER
HOME ADDRESS	CITY ZIP
DISTRICT WHERE EMPLOYED	NAME OF SCHOOL WHERE ASSIGNED
NAME OF ASSIGNEE (New teacher/teacher intern)	
BEGINNING DATE OF ASSIGNMENT (>8/1/2009)	COMPLETION DATE OF ASSIGNMENT (<12/31/2009)

CEU Applicant (Supervising Teacher)

Date

I certify the criteria to receive MI SB-CEUs for MDE Fall 2009 – Supervising Teacher have been met.

Building Principal's Signature

Date

Office Use Only:	
Genesee Intermediate School District	Program Approval Number will be provided on a transcript, by request, once participation has been verified by the MI SB-CEU Coordinator. 3.0
SB-CEU Sponsor	Program Approval Number Number of MI SB-CEUs
SB-CEU Coordinator's Signature	Date

RETAIN A COPY OF THIS FORM FOR YOUR RECORDS.

An official transcript can be obtained by contacting GISD's Office of Education and Learning at: 810-591-4408