

## SB-CEU PARTICIPANT VERIFICATION FORM FOR MDE FALL 2009 - NEW TEACHER MENTOR

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 – New Teacher Mentor

Criteria:

- A new teacher mentor must be assigned to a new teacher for a least a full semester of an academic year.
- A new teacher mentor must submit to the building principal an evaluation of the mentoring process for the application period and a copy of that evaluation should be attached to this form.

The original completed copy of this form along with a copy of the new teacher evaluation must be filed with the MI SB-CEU sponsor no later than 30 days following the assignment.

**PRINT**

<b>NAME</b> (First and Last)	<b>LAST FOUR (4) DIGITS OF SOCIAL SECURITY NUMBER</b>
<b>HOME ADDRESS</b>	<b>CITY</b> <span style="float: right;"><b>ZIP</b></span>
<b>DISTRICT WHERE EMPLOYED</b>	<b>NAME OF SCHOOL WHERE ASSIGNED</b>
<b>NAME OF ASSIGNEE (New Teacher09-10)</b>	
<b>BEGINNING DATE OF ASSIGNMENT</b>	<b>COMPLETION DATE OF ASSIGNMENT</b>

\_\_\_\_\_  
New Teacher Mentor's Signature

\_\_\_\_\_  
Date

***I certify the criteria to receive MI SB-CEUs for serving as a MDE Fall 2009 - New Teacher Mentor have been met.***

\_\_\_\_\_  
Building Principal's Signature

\_\_\_\_\_  
Date

Office Use Only:	
<b>Genesee Intermediate School District</b>	Program Approval Number will be provided on a transcript, once participation has been verified by MI SB-CEU Coordinator. <b>3.0</b>
SB-CEU Sponsor	Program Approval Number <span style="float: right;">Number of MI SB-CEUs</span>
SB-CEU Coordinator's Signature	Date

**RETAIN A COPY OF THIS FORM FOR YOUR RECORDS.**

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