

## SB-CEU PARTICIPANT VERIFICATION FORM FOR MDE Spring 2010 – 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 Spring 2010 – 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**

<b>NAME (First and Last)</b>	<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</b> (New teacher/teacher intern)	
<b>BEGINNING DATE OF ASSIGNMENT</b> (>1/1/2010)	<b>COMPLETION DATE OF ASSIGNMENT</b> (<5/31/2010)

\_\_\_\_\_  
CEU Applicant (Supervising Teacher)

\_\_\_\_\_  
Date

***I certify the criteria to receive MI SB-CEUs for MDE Spring 2010 – Supervising Teacher 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, by request, once participation has been verified by the 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 obtained by contacting GISD's Office of Education and Learning at: 810-591-4408