MSU Special Education Teacher Preparation Program
REPORT ON SUBSTITUTE TEACHING BY AN INTERN

Intern's name: ____________________________________________

Mentor Teacher: ________________________ School: ________________________

Part I. To be submitted to the Field Instructor upon initial approval to substitute teach.

It is generally recommended that the intern's readiness for subbing is most accurately assessed toward the end of week 8-10 of fall and spring semester. In some cases, even more time will be needed to be sure the intern is ready to take on that responsibility. Readiness is decided on a case by case basis in consultation with the intern, the mentor teacher and the field instructor.

The undersigned agree that the following requirements have been met:
- The intern judges that he or she is prepared to accept the responsibility of serving as a substitute teacher, and freely chooses to do so.
- The mentor teacher determines that the interests of his or her pupils will be served.
- MSU's field instructor and school liaison determine that the intern is making satisfactory progress in the internship, including the required courses, and so should benefit from the experience.
- The intern has been qualified and accepted as a substitute teacher in accordance with the school district's policies and procedures.

The intern and mentor teacher further agree that the following conditions will be met:
- The substitute teaching does not interfere with the intern's attendance at the MSU courses in which s/he is enrolled or with competition of assigned work in or related to those courses.
- The mentor teacher's principal is informed in advance that the intern may or will serve as the substitute.

_________________________________ Date ____________________________
Intern's signature

_________________________________ Date ____________________________
Mentor Teacher's signature

_________________________________ Date ____________________________
Field Instructor's signature

_________________________________ Date ____________________________
Building Administrator's signature

Updated 7/2012
MSU Special Education Teacher Preparation Program

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Intern's name: ____________________________________________________________

Mentor Teacher: ___________________________ School: _______________________

Part II. To be submitted to the Field Instructor at the end of each semester.

The intern substituted for the mentor teacher on the following occasions:

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<thead>
<tr>
<th>Date</th>
<th>Extent (enter &quot;1.0&quot; for full days, &quot;.5&quot; for half days)</th>
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Intern’s signature

Mentor Teacher’s signature

Field Instructor’s signature

Building Administrator’s signature

TOTAL ___

Updated 7/2012