

**HOFSTRA UNIVERSITY**  
**School of Education**  
**Office of Field Placement**  
**240 Hagedorn Hall**  
**516-463-5746**

**ENL STUDENT TEACHING/PRACTICUM - TIME SHEET**

STUDENT NAME \_\_\_\_\_ SEMESTER \_\_\_\_\_

STUDENT HOFSTRA ID# \_\_\_\_\_

HOFSTRA ADVISOR \_\_\_\_\_

SCHOOL/DISTRICT \_\_\_\_\_ SCHOOL PHONE # \_\_\_\_\_

COOPERATING TEACHER \_\_\_\_\_ GRADE LEVEL(S) \_\_\_\_\_

**NOTE:**

- This is a legal document. Hours and signatures are subject to verification. Penalties will be imposed if any information is falsified or misrepresented by a Hofstra student.

DATE	TIME IN	TIME OUT	COOPERATING TEACHER SIGNATURE

**TOTAL NUMBER OF HOURS** \_\_\_\_\_