

ELEMENTARY STUDENT TEACHING WEEKLY SCHEDULE

NAME _____ WEEK OF _____
SCHOOL _____

MORNING				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY

AFTERNOON				
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY

TO THE STUDENT TEACHER:

Send a copy of your teaching schedule to your University Supervisor on Friday of the preceding week. Indicate classes which you will be teaching and times at which these classes meet. Indicate also times which will be unsuitable for observation including parent conferences, special meetings, curriculum days, programs, etc.