

COLLEGE OF EDUCATION AND LIBERAL ARTS
EDUCATION DEPARTMENT

FIELD STUDY OBSERVATION
DAILY TIME RECORD

NAME: PERDOMIO, CARA JANE I.

COOPERATING SCHOOL: BONUAN BOQUIG ELEMENTARY SCHOOL

FIELD STUDY CODE AND SCHEDULE: _____

DATE	AM-IN	AM-OUT	PM-IN	PM-OUT	TOTAL HRS	VERIFIER
02-27-23	7:00	11:30	1:00	4:30	8 HRS.	<i>[Signature]</i>
02-28-23	7:00	11:30	1:00	4:30	8 HRS.	<i>[Signature]</i>
03-01-23	7:00	11:30	1:00	4:30	8 HRS.	<i>[Signature]</i>

I certify to my honor that the above is true and correct report of hours of work performed, record of which was made daily at the time of arrival and at departure from the cooperating school.

Signature over printed name

Notes from the Resource/Cooperating teacher:

She very attentive in observing the teachers while teaching the lessons.
She is also helping the children checking their task.

Resource/Cooperating Teacher: GLORIA G. CALAS

Dater Signed: March 01, 2023

Signature: *[Signature]*

Professor: _____

Date Received: _____

Signature: _____