

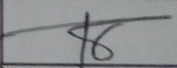
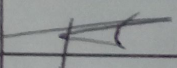
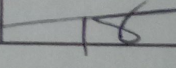
COLLEGE OF EDUCATION AND LIBERAL ARTS
EDUCATION DEPARTMENT

FIELD STUDY OBSERVATION
DAILY TIME RECORD

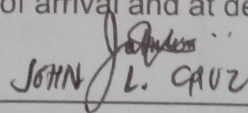
NAME: JOHN L. CAUZ

COOPERATING SCHOOL: WEST CENTRAL ELEMENTARY SCHOOL II

FIELD STUDY CODE AND SCHEDULE: EDU 065 - FRIDAY - 1:30 - 2:30

DATE	AM-IN	AM-OUT	PM-IN	PM-OUT	TOTAL HRS	VERIFIER
02-27-23	7:30 AM	12:00 PM	12:50 PM	4:30 PM	8 HRS	
02-28-23	7:27 AM	12:00 PM	12:50 PM	4:30 PM	8 HRS	
03-01-23	7:30 AM	12:00 PM	12:59 PM	4:30 PM	8 HRS	

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.



JOHN L. CAUZ

Signature over printed name

Notes from the Resource/Cooperating teacher:

Resource/Cooperating Teacher: Mr. Ricardo J. Branzuela

Dater Signed: 03-01-2023

Signature: 

Professor: Ms. Irene Joyce T. Loreseo

Date Received: _____

Signature: _____