




COLLEGE OF EDUCATION AND LIBERAL ARTS  
EDUCATION DEPARTMENT

FIELD STUDY OBSERVATION  
DAILY TIME RECORD

NAME: CHRIS ANGEL D. C. GAMBOA

COOPERATING SCHOOL: WEST CENTRAL ELEMENTARY SCHOOL II

FIELD STUDY CODE AND SCHEDULE: EDU 055 - FRIDAY (1:30-2:30)

DATE	AM-IN	AM-OUT	PM-IN	PM-OUT	TOTAL HRS	VERIFIER
02/27/23	7:30	12:00	1:00	4:30	8 HRS	
02/28/23	7:30	12:00	1:00	4:30	8 HRS	
03/01/23	7:30	12:00	1:00	4:30	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.

CHRIS ANGEL D. C. GAMBOA


Signature over printed name

Notes from the Resource/Cooperating teacher:

Thank you for being an observer to my class. You help a lot my other learners.

Thank you for being helpful.

Resource/Cooperating Teacher: TRENE F. TRANSFIGURACION

Dater Signed: MARCH 01, 2023 Signature: 

Professor: \_\_\_\_\_

Date Received: \_\_\_\_\_ Signature: \_\_\_\_\_