

**Alternative Placement Log**

*Please complete and return this form to the Practicum Office (ptoffice@nipissingu.ca) by 4:00 p.m. on Friday, February 8, 2019.*

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| **Teacher Candidate Name:** | **Student ID:** |
| **Organization:** | **Site Supervisor Name:** |

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| **Date** | **# Hours Completed** | **Summary of Responsibilities** | **Site Supervisor Initials** |
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| **Reflections** | | | |
| **When completing your reflections, ask yourself the following questions:**   * *How did I apply course-based knowledge and prior classroom experience in my alternative placement?* * *What aspect of my alternative placement resonated with me the most and why?* * *How has my alternative placement informed my professional growth?* * *How has my alternative placement impacted me (e.g., personally, professionally)?* | | | |

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| **Total # of Hours Completed:** **/minimum 115 hrs.** | |
| **Teacher Candidate Signature:** | **Date:** |
| **Site Supervisor Signature:** | **Date:** |