

CLINICAL TEACHER ABSENCES/ATTENDANCE FORM

Complete and give to your cooperative teacher to scan and email this form to Gloria Reidlinger, greidlinger@wtamu.edu, with assessment forms by September 20, October 18, and December 6. Please mark an A for absences and T for tardy (arriving late or leaving early). Please sign at the bottom of the page.

Week	Monday	Tuesday	Wednesday	Thursday	Friday		
One Sept. 2-6	Time In:	Time In:	Time In:	Time In:	Time In:	Initials	
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Two Sept. 9-13	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Three Sept. 16-20 1 st Formative	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Four Sept. 23-27	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Five Sept. 30-Oct. 4	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Six Oct. 7-11	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Seven Oct. 14-18 2 nd Formative	Time In:	Time In:	Time In:	Time In:	Time In:		Initials
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Eight Oct. 21-25	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Nine Oct. 28-Nov. 1	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Ten Nov. 4-8	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Eleven Nov. 11-15	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Twelve Nov. 19-22	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		
Thirteen Dec. 2-5 Summative	Time In:	Time In:	Time In:	Time In:	Time In:		
	Time Out:	Time Out:	Time Out:	Time Out:	Time Out:		

Clinical Teacher Signature: _____ Date: _____

Cooperating Teacher Signature: _____ Date: _____