STATE CONTINUING EDUCATION CLOCK HOURS (SCECHs)
PARTICIPANT VERIFICATION FORM

Supervision of Pre-Teaching/Mid-tier/Pre-Service Student-2nd Semester

This form must be completed for eligible participants to receive SCECHs for participation in the Supervision of Pre-Teaching/Mid-tier/Pre-Servic e Student program. It must be accompanied by a log recording the actual time spent with the student. This program offers a range of 3 to 15 SCECHs rec orded on the log.
****Each school-based non-traditional activity may only be used a maximum of three (3) times toward certificate renewal within an educator's certificate renewal period. A maximum of 15 SCECHs may be earned per semester.***

A completed copy of this form must be filed with the SCECH sponsor **no more than 30 calendar days after the end date of the activity**.

(Type or Print)

Name	
Email Address	PIC
Name of School District Where Employed	
Name of School Where Assigned	
Name of Assignee	
Beginning Date of Professional Activity 1/2/2018	Completion Date of Professional Activity 6/29/2018

_____ _____
Supervising Teacher Signature Date

I certify the criteria to receive SCECHs for the above activity has been met and the required documentation pertaining to the activity has been reviewed. This documentation is:
☐ on file for review ☐ on file with the teacher preparation institution

The Supervising Teacher has completed_____ hours with the student.
(between 3-15)

_____ _____
Building Principal/District Superintendent Signature Date

_____ _____
SCECH Coordinator Signature Date

20172655 25
SCECH Program Approval Number SCECHs Awarded

Advisory: **It is a criminal offense to use or attempt to use a SCECH transcript or certificate of completion that is fraudulently obtained, altered, or forged to obtain and/or maintain school administrator, teacher and/or school psychologist certification or other State Board of Education approval**