

The Good FIT Program Instructional Intern Participation Log

Good FIT Intern Name:				Host Teacher Name:				Grade:		
Semester:				School:				County:		
Good FIT students should actively participate in instructional classroom activities Please check what best describes your activities for that day										
	Date	Time In	Facilitated Group Learning by circulating and assisting the teacher Y/N	Worked with small group(s) directing or guiding activities Y/N	Assisted individual students who needed extra help Y/N	Assisted teacher with preparation for lessons, labs, and other activities Y/N	Other – Please describe – <i>for more space include date and activity on the back of page</i>	Time Out	Brief Reflection on the Day by Good FIT Intern <i>(include date and activity on the back of page, if more space is necessary)</i>	Host Teacher Signature
Day 1										
Day 2										
Day 3										
Day 4										
Day 5										
Day 6										
Day 7										
Day 8										
Day 9										

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Day 10										

Notes: