



SCHOOL OF EDUCATION

REMINDER: CLINICAL PRACTICE EXIT PAPERWORK

Supervisor Name: _____

All paperwork must be TYPED, ORIGINALS with signatures in **BLUE** ink.

1. TPE Forms

- Name of teacher candidate and ID number must be on each page
- Complete Recommendation, SAIE/ELD/BCLAD, Exit Date and Semester/YR lines (ALL INFORMATION MUST BE FILLED IN)

2. Summary

- Teacher Candidate's name and ID number must be on the form
- Original signatures must be at the bottom

3. Logs

- Supervisors must sign at the bottom of the page

Please remember that all TPE's must be met for Clinical Practice II

All forms are online at:

<http://www.csusm.edu/soe/credential/middlelevel/clinicalpractice.html>