

**Please print clearly**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

**IMPORTANT: You must complete this form COMPLETELY for SHINE Staff to know which professor to send your hours to.**

**PLACEMENT INFORMATION**

ESL/Citizenship Teacher: \_\_\_\_\_

Day and Time of ESL/Citizenship class: \_\_\_\_\_

# of learners in ESL/Citizenship class: \_\_\_\_\_

**CREDIT COURSE**

Credit Professor: \_\_\_\_\_

Credit Class: \_\_\_\_\_

Days & Time of Credit Class: \_\_\_\_\_

**\*\*\*\* REMINDER: You must complete 10 weeks of coaching (2 hours/week) in addition to attending the SHINE Training and Final Reflection \*\*\*\***

<i>Date</i>	<i>Activities you helped with today</i>	<i># of learners you worked with today</i>	<i>Hours Coached Today</i>
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**\*\*\* Turn Over for more space \*\*\***