Agreement to Make Up Absence UEDU Internships

To make up for a (an)_________________________ absence on ________________,
all day/no. of hours            date
___________________________________ will engage in school internship activities
Teacher Candidate
on __________________ from _______ to ________.
date   time              time

The above is agreed to by:

________________________________________  _____________
Teacher Candidate        Date

________________________________________  _____________
Clinical Teacher        Date

________________________________________  _____________
Site Professor or Site Coordinator                 Date

Variation in Agreement Form UEDU Internships

Instead of the following schedule or assignment, ______________________________
_____________________________________________________________________,
_________________________________ will _________________________________
Teacher Candidate
_____________________________________________________________________.

The above variation in schedule/assignment is agreed to for ____________________.

___________________________________  ____________
Teacher Candidate           Date

___________________________________  ____________
Clinical Teacher           Date

__________________________________                ____________
Site Professor or Site Coordinator                              Date