# Request for Letter of Documentation
## (Observation Hours)

INSTRUCTIONS TO STUDENT:

Give this to your supervisor at the beginning of (or before) your observation hours, and ask if he or she can have the letter ready for you when you have completed your 30 hours. Put the letter in your advising folder so you will have it when you apply to the program. Keep it in the original, SEALED, envelope.

INSTRUCTIONS TO SUPERVISOR:

Thank you for providing the opportunity for future teachers to get this valuable observation experience at your school. As part of the application for admission into the Professional Licensure Program at Western Oregon University, students need to get a confidential letter documenting 30 hours of classroom observation. During this time, the students' role is to observe and assist you. Would you be willing to write a letter using the following format, and give it to this student in a sealed envelope on the last day of his or her experience with you?

## LETTER TEMPLATE
*(Must be written by supervisor, on school letterhead, and given to student in a sealed envelope that is signed across the seal)*

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School Letterhead


DATE

To Whom It May Concern:

In the first paragraph, please include the name of the student, a description of his or her time commitment (must be a minimum of 30 hours), setting, and dates of participation.

In the second paragraph, please include the student's specific responsibilities and tasks, as well as a basic evaluation of his or her performance.

In the third paragraph, please give any additional information you wish to share about the student's responsibilities from paragraph two.

In the fourth paragraph, please give your prediction of the student's future success as a teacher, based upon your personal observations.  Include whether or not you recommend this student for the Professional Teacher Licensure Program at Western Oregon University, and why or why not.

In the last paragraph, provide your contact information in case follow-up is needed.

Sincerely,

*Original Signature Here*

Type your name here

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