Table

Description automatically generated with low confidence

UWSP Questionnaire for DPI Substitute Teaching License

|  |  |
| --- | --- |
| Full Name  (first name, middle initial, last name) |  |
| Birthdate xx/xx/xxxx |  |
| UWSP ID# |  |
| Teaching majors |  |
| Are you a Junior or higher (at least 60 credits completed towards graduation. NOTE: Remedial and “precollege” courses do not count.)? |  |
| Where and when did you complete at least 15 hours of classroom observation | School District:  School Name:  Teacher’s Name:  Dates of observations:  Total Hours of Observation: |