

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: |