

## Preservice Teacher Mid Self-Reflection Year 1

**Preservice Teacher Name:** 

Practicum School:	
University Advisor Name:	
Associate Teacher Name:	
Grade Level/Courses:	
Relationships	

Classroom Routines and Procedures		
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I have reviewed th	is self-reflection with my University Advisor and my Associate Teacher.
Date:	Signature:
Submitted by the U	Jniversity Advisor:
Date:	Signature:
Diago materia is a la	ter than <b>May 1st</b> to Mount Saint Vincent University, Faculty of Education, SAC 449,

Please use "nameY1MS" as filename

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