Arcadia Unified School District
Accountability Log
FACT Module B – Initial Assessment of Teaching Practice

Participating Teacher _____ Support Provider _____
Year: ☐ 1 ☐2 ☐Registered for units

Activities	Monthly Contact Record
Module B: Initial Assessment of Teaching Practice o B-1.1 Teacher Preparation/Induction Alignment Chart o B-1.2 Alignment Chart Discussion Guide o B-2 Know-Want to Know-Observe Chart o B-3 Informal Classroom Observation o B-4 Post Observation Reflection **Turn in:** ☐ Module B Accountability Log ☐ A-7.2 Pedagogy Conversation Guide	**BTSA requires a minimum of 60 minutes weekly contact with SP.** **Additional Comments:**

Date	Outcome	Hours

We have completed **Module B: Initial Assessment of Teaching Practice**

_____ _____
Support Provider Signature Participating Teacher Signature

White copy – BTSA Office Yellow copy – Support Provider Pink copy – Participating Teacher