



University  
of Houston  
Clear Lake

**PROGRAM VERIFICATION**

**Student Name:** \_\_\_\_\_

**Semester/Year:** \_\_\_\_\_ **Course Name & Number:** \_\_\_\_\_

**Instructor:** \_\_\_\_\_

**Instructor's Telephone:** \_\_\_\_\_ **Instructor's Email:** \_\_\_\_\_

**District:** \_\_\_\_\_ **Campus:** \_\_\_\_\_

This letter is to serve as verification that the above-named student is enrolled in the above-referenced University of Houston-Clear Lake course, and as a component of the course, the above-named student is required to complete observation hours/field experience.

Should you have any questions, please feel free to contact me.

Sincerely,

\_\_\_\_\_  
INSTRUCTOR'S SIGNATURE

\_\_\_\_\_  
DATE