

Corona-Norco Unified School District
Teacher Induction Program Completion Checklist

Participating Teacher: _____ **School Year Entered Program:** _____

Attendance at CNUSD's Mandatory New Teacher Orientation/In-service
Date Attended: _____ **Initials of Teacher Induction Program Director** _____

| Activity Log for Year 1 | Date Verified as Complete |
|---|----------------------------------|
| Introduction to Induction | |
| Triad Meeting | |
| Individualized Learning Plan (ILP) | |
| Completion of CSTP Self-Assessments | |
| Completion of Cohort Collaborations | |
| Completion of Spring Inquiry Cycles | |
| Attendance at Year One Inquiry Research Symposium | |

| Activity Log for Year 2 | Date Verified as Complete |
|---|----------------------------------|
| Triad Meeting | |
| Individualized Learning Plan (ILP) | |
| Completion of CSTP Self-Assessments | |
| Completion of Fall Inquiry Cycles | |
| Completion of Cohort Collaborations | |
| Completion of Spring Inquiry Cycles | |
| Attendance at Year Two Inquiry Research Symposium | |
| Completion of End of Program Reflection | |
| Completion of Exit Interview | |

Verification of fulfilling the Teacher Induction Program Completion Checklist

Signature of First Year Teacher Induction Mentor: _____ Date: _____

Signature of Second Year Teacher Induction Mentor: _____ Date: _____

Signature of Teacher Induction Director: _____ Date: _____

Signature of Participating Teacher: _____ Date: _____