



Guided Observation Program

Participation Verification



Thank you for participating in the Simucase Guided Observation program.
Please complete this form when all video observations are complete.

- I verify that I completed _____ hours of _____ observation.
- I verify that I completed the selected videos in Interactive Mode.
- I understand that I can access my video transcripts in the My Learning page on the Simucase website.
- I verify that I participated in a live _____ guided observation discussion with a member of the Simucase team on _____ (date).

Student name: _____

Student signature: _____

Date: _____