**CBAT Coordinator’s Visit Report**

The person making the visit will complete and submit this form to CBAT regional coordinator.

**Coach: New Teacher:**

**Date of Visit:**

**Location of Visit:**

**Topics discussed during visit:**

**Suggested strategies discussed:**

**A FIRST SEMESTER VISIT IS HIGHLY RECOMMENDED.**

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**CBAT Coach Signature New Teacher’s Administrator Signature**

→Send one copy to the new teacher

→Send one copy to the CBAT coach

→Retain one copy for coordinator files