

# Student Teaching Worksheet

**OFFICE USE ONLY**

1<sup>st</sup> Placement: \_\_\_\_\_

2<sup>nd</sup> Placement: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Name: \_\_\_\_\_

Gender: (please circle) Male, Female, Other

Major (please check one):

Childhood (1-6) \_\_\_\_\_

Early Childhood/Childhood (Dual B-6) \_\_\_\_\_

Adolescence \_\_\_\_\_

GPA: \_\_\_\_\_

Concentration: \_\_\_\_\_

Semester/Year of Student Teaching: Fall/Spring: \_\_\_\_\_ Year: \_\_\_\_\_

Phone# (local): \_\_\_\_\_ (cell): \_\_\_\_\_

Email: \_\_\_\_\_

City/Town you will be living in during student teaching: \_\_\_\_\_

County (area) requested:

\_\_\_\_\_

During High School I attended: \_\_\_\_\_

During Middle School I attended: \_\_\_\_\_

During Elementary School I attended: \_\_\_\_\_

Please list any schools where any of your immediate family member(s) work/teach/attend:

\_\_\_\_\_

\_\_\_\_\_

Are you open to a placement in a Non-Public School Setting? Yes or No \_\_\_\_\_