



## APPLICATION FOR DIRECTED STUDENT TEACHING

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

### STUDENT TEACHING PLACEMENT REQUEST

School: \_\_\_\_\_ District: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Principal: \_\_\_\_\_

Mentor Teacher: \_\_\_\_\_ Mentor Teacher Email: \_\_\_\_\_

Grade/Subject: \_\_\_\_\_ Semester: Fall \_\_\_\_\_ Spring \_\_\_\_\_

#### **Cumulative Hours:**

Total College Hours: \_\_\_\_\_ Total Professional Education Hours: \_\_\_\_\_

#### **Cumulative Grade Point Averages:**

Total College GPA: \_\_\_\_\_ (\*2.5 required) Total Professional GPA: \_\_\_\_\_ (\*3.0 required)

#### **Qualifications (for Elementary Education Students):**

Date the Arizona Subject Knowledge Elementary Education Exam was taken and passed: \_\_\_\_\_

#### **Qualifications (for Secondary Education Students):**

Date the Arizona Subject Knowledge Secondary Education Exam was taken and passed: \_\_\_\_\_

#### **Office use only:**

Date approved: \_\_\_\_\_

Registrar: \_\_\_\_\_

Education Coordinator: \_\_\_\_\_

Revised 9/29/15