

UNIVERSITY OF TENNESSEE AT MARTIN
College of Education & Behavioral Sciences
Office of Field Experiences

May 18, 2010

Semester: **Fall 2010**

Assignment Dates: **August 30 – October 14**

School System: Milan

School: Milan Middle School

<u>STUDENT TEACHER</u> Name/Major	<u>REQUESTED PLACEMENT</u> School and Grade/Subject	<u>ASSIGNED PLACEMENT</u> School and Grade/Subject	<u>ASSIGNED COOPERATING TEACHER(S)</u> Primary C. T. Secondary C. T.	
(Art)	5-8 Art Education			

Please **indicate the students whom you will be able to place, assigned placement, and assigned cooperating teacher(s). Sign and return as soon as possible.** Retain a copy for your records. Thank you for your cooperation in making these arrangements.

Details of placement are made through:

Education Student Services
205 Gooch Hall
University of Tennessee at Martin
Martin, TN 38238
Phone: 731-881-7215 Fax: 731-881-7204

Approved By:

_____ Name
Position: (Check One)
 Director Principal System Coordinator