APPLICATION FOR STUDENT TEACHING

PLEASE READ THE FOLLOWING BEFORE COMPLETING APPLICATION

Student teaching provides opportunities for students to practice the theory from campus-based instruction in actual classroom settings; to work with various professionals in education for an extended period of time; and to see a complete picture of future responsibilities. Student teaching provides experiences which will enhance and advance the student's competency in the task of teaching. The experience will lead to further refinement of skills and characteristics for effective teaching. Admission to and continuance in the student teaching program requires that the following procedures and policies be met and maintained.

1. Application for student teaching must be filed with the Office of Educator Preparation Programs one semester in advance of the student teaching semester. Applications are available on-line at http://www.utm.edu/departments/ess/studentteach.php. Applications are due on:
   - September 15 for the following Spring Semester
   - January 30 for the following Fall Semester

2. Before admission to the student teaching semester, you must have fulfilled the following requirements:
   a. Admission to the Education Preparation Program
   b. Senior standing and a minimum cumulative grade point average of 2.75
   c. Completion of 80% of coursework in your endorsement area(s)
   d. Completion of all specialized teaching strategies courses and reading requirements
   e. Evidence of professional liability insurance coverage
   f. Portfolio approval
   g. Verification of criminal background check

3. Student teachers will not be placed in schools they have previously attended or in schools where members of the student teacher's immediate family are staff members or students. Students wishing to be placed in the Memphis or Nashville area must meet with Ms. Staci Fuqua prior to submission of the student teaching application. Strict deadlines prohibit late requests.

4. Your application will only be accepted if it is submitted as follows: Part I must be submitted on-line and as a hard copy with Parts II and III. Your advisor’s signature, four copies of the Student Teacher Autobiographical Data Form, and one photograph must be included.

5. Evidence of STEA membership or of comparable professional liability insurance must be provided before student teaching placement begins.

6. Student teaching is considered to be a full-time program and no student is expected to enroll in other courses, have employment, campus responsibilities, or other hindrances which tend to interfere with the responsibilities which regular teachers are expected to assume. Exceptions must be approved by the Coordinator of Field Placements before submitting application.

I hereby attest that I understand the above policies as set forth and that the information provided in this application is accurate.

Signature:  __________________________________________

Note: Fill out these forms, with your advisor's approval and signature, and return to:

Suite 205 Gooch Hall, UT Martin  Revised: 12/20/17
## PART II

I. Name ____________________ Social Security No. ____________________
   (For licensure use only. Will not be shared with school districts.)

II. General Information: Female ___ Male ___

   Marital Status: Married ___ Single ___

   Birth Date: ____________________

III. List all elementary schools and high schools attended

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<thead>
<tr>
<th>Name of School</th>
<th>Address of School</th>
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<td>1. ____________________</td>
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III. Do you have children in school? Yes___ No___

   If so, what school(s) do they attend? ____________________

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### Intern Release Request

It is necessary under the provisions of the Family Educational Rights & Privacy Act of 1974, or commonly known as the Buckley Amendment, to obtain from individuals seeking on-site placements for licensure through the Office of Educator Preparation Programs an Authorization of Disclosure regarding his/her records. In order for this office to be of any service to you, we must have your approval to submit your credentials to prospective employers and education institutions that receive UTM intern students to be a participant in on-site programs of instruction. Please sign the Authorization of Disclosure below after reading it carefully.

**Authorization of Disclosure**

I, the undersigned, agree that the above information in this application, including academic records, may be made available by the Office of Educator Preparation Programs to both prospective employers and school districts requiring the information for approval of internship assignments.

Signature ____________________ Date __________

(Use full legal name)

Revised: 12/20/17
PART III
Special Education
(K-8 Interventionist or 6-12 Interventionist)

I. Name ________________________________ Student I.D. No. _______________________

What semester do you expect to graduate? __________________________

Cumulative grade point average __________

II. Information concerning courses prerequisite to student teaching
The following courses must be taken and a passing grade earned before you will be
eligible for an assignment to student teaching. Check courses you have completed or
are now taking.

___ SPED 300  ___ HLRN 311  ___ READ 438
___ SPED 386  ___ HLRN 325
___ SPED 415  ___ HPER 304  One of the following:
___ SPED 420  ___ MATH 191  ___ TCED 450
___ SPED 430  ___ MATH 192  ___ TCED 475
___ SPED 432  ___ TCED 211 or 301  ___ LIBS 451
___ SPED 437  ___ TCED 302  ___ SPED 450
___ SPED 440  ___ TCED 340  ___ SPED 451
___ SPED 460  ___ TCED 350

Student Teaching Semester
TCED 407  TCED 408

III. Proposed program for semesters preceding, during, and following student teaching.
Do not complete the portion below without conferring with your advisor.

Semester _________  Semester _________  Semester _________
____________________  ____________________  __________________
____________________  ____________________  __________________
____________________  ____________________  __________________
____________________  ____________________  __________________

This application will not be accepted by the Office of Educator Preparation Programs
without your advisor's approval.

______________________________  ________________
Advisor's Signature  Date