**KENNESAW STATE UNIVERSITY**

 **Provisional teacher approval form to use classroom as placement**

Directions: M.Ed. or MAT students and other students who are planning to use their current classroom to fulfill their Field Experience, Single Semester Student Teaching or Yearlong Clinical I/II Experience must fill out this form and submit it to the office of Clinical Experiences, Placements and Partnerships (CEPP), so the CEPP office has a record of their job site and classroom information for supervision assignments.

**Important note:** In order for a provisional teaching position to fulfill program requirements, the position **MUST** be teaching in the area of specialization for which the KSU student is seeking certification (i.e. if you are a biology MAT student, the teaching position must be in biology). The collaborating teacher **MUST** have the same certification as you are seeking.

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**To be completed by the KSU Teacher Candidate:**

KSU Teacher Candidate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ KSU ID PSC#\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell # \_\_\_\_\_ KSU Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester \_\_\_\_\_\_\_\_\_\_\_\_

Graduate Program\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Field Experience (circle one): FEXP or YCE I/II

School of Employment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School District\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Name School Phone \_\_\_\_\_\_\_

Grade level Class(es)Taught Type of position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Ex: History, English) (Ex: provisional, long-term substitute)

Collaborating Teacher’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PSC# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Collaborating Teacher’s email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Principal/ Representative\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name Signature Date

KSU Teacher Candidate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name Signature Date

Program Advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name Signature Date

*\*In schools where there is only one teacher or faculty in a particular subject area, a closely aligned mentor teacher in another field may suffice. See GaPSC Educator Preparation rule 505-3-.01 Appendix C* [*http://www.gapsc.com/Commission/Rules/home.aspx*](http://www.gapsc.com/Commission/Rules/home.aspx)

For questions regarding completion of this form, please contact CEPP 470-578-6734 or Donna Fitzgerald dfitzge5@kennesaw.edu