

**Teacher Candidate Placement Information**

*Provide this completed form to your University Supervisor at your earliest opportunity*



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| --- | --- | --- | --- | --- | --- | --- | --- |
| Personal Information | | | | | | | |
| Name |  | | | | | | |
| Address while student teaching | | | |  | | | |
| Telephone (best to call) | |  | | | Email |  | |
| School Information | | | | | | | |
| Name of School | | |  | | | | |
| School Address | | |  | | | | |
| School Telephone | | |  | | Principal | |  |
| Cooperating Teacher | | |  | | Email of CT | |  |
| Placement Begins | | |  | | Placement Ends | |  |
|  | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| Period | Time | Subject | | | Grade | Room # |
| Before School |  |  | | |  |  |
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|  |  |  | | |  |  |
| After School |  |  | | |  |  |
|  |  |  | | |  |  |
| Best time to contact/meet | | |  | | | |
| Dates during the placement that classes will not meet (vacations, testing days, conference days, inservice days,  etc.) | | | | | | |
|  | | | | | | |
| Employment outside of student teaching (include work schedule) | | | | | | |
|  | | | | | | |
| Other important information | | | |  | | |
|  | | | |  | | |

This document is prepared in a table format. Please tab into blank boxes to provide the appropriate information. Note: All schedules will vary. Provide general information only.