

WAGNER COLLEGE EDUCATION DEPARTMENT

Undergraduate Application to Student Teach

(to be completed with Education Advisor)

NAME: _____

e-mail: _____

Local Address: _____

Phone: (h) _____

(b) _____

Home Address: _____

(c) _____

I wish to undertake my student teaching in the Fall ____/Spring ____ semester of 200 .

I do _____ do not _____ have a car.

Certification Desired (Check One)

- Elementary PreK-6
- Elementary PreK-6, plus 7-9 Ext. _____(content)
- Music K-12
- Secondary 7-12 _____(content)
- Childhood 1-6 /SpEd 1-6 (check one double major below)

<input type="checkbox"/> Art/Childhood Ed	<input type="checkbox"/> History/Childhood Ed
<input type="checkbox"/> French Studies/Childhood Ed	<input type="checkbox"/> Spanish/Childhood Ed
<input type="checkbox"/> English/Childhood Ed	<input type="checkbox"/> Mathematics/Childhood Ed
<input type="checkbox"/> Music/Childhood Ed	<input type="checkbox"/> Psychology/Childhood Ed
<input type="checkbox"/> Theatre/Childhood Ed	<input type="checkbox"/> Sociology/Childhood Ed
	<input type="checkbox"/> Natural Science/Childhood Ed

You are eligible for Student Teaching because you have satisfied **all** pre-student teaching requirements as follows:

1. Admitted to Teacher Preparation Program (TPP) _____
2. Completed 25.5 Units with a GPA of 2.75 _____
3. Completed all required professional education courses with a GPA of 2.75 or better _____
4. Passed the LAST component of the NYSTCE _____
5. Passed the CST (content) component of the NYSTCE (beginning 2/04) _____
6. Completed and documented all pre-student teaching field experience hours _____
7. Earned overall G.P.A. _____
8. Submitted two letters of recommendation (see attached) _____
9. Interviewed by advisor at the time of application for entry into Student Teaching _____
(attached narrative)

Advisor Signature: _____

I realize I will be placed in two developmentally appropriate settings and will be informed in writing by the Department of Education of the placements.

Note: Teacher Education Preparation (Policy) Unit (TEPU) to make final determination.

Student Signature: _____

Ed Dept. Chair Signature: _____

WAGNER COLLEGE EDUCATION DEPARTMENT
Professional Education Faculty

RECOMMENDATION FOR STUDENT TEACHING

(Name of Student)

(Major)

(Double Major / Concentration)

Level of Student Teaching

- ___ Elementary PreK-6
- ___ Elementary PreK-6, plus 7-9 Ext. _____
- ___ Secondary Education 7-12
- ___ Music Education K-12
- ___ Childhood 1-6, SpEd 1-6

The above named candidate is applying to student teach during the _____ 200____ semester. Please comment on the candidate's preparedness in terms of knowledge, skills, and dispositions to engage in student teaching.

Please return this form as soon as possible to the Department of Education, Campus Hall #331.

_____ **I recommend** (comments):

_____ **I do not recommend** (comments):

_____ **I wish to confer with the Coordinator of Student Teaching about this candidate.**

Signature

WAGNER COLLEGE EDUCATION DEPARTMENT
Liberal Arts Faculty

RECOMMENDATION FOR STUDENT TEACHING

(Name of Student)

(Major)

(Double Major / Concentration)

Level of Student Teaching

- ____ Elementary PreK-6
- ____ Elementary PreK-6, plus 7-9 Ext. _____
- ____ Secondary Education 7-12
- ____ Music Education K-12
- ____ Childhood 1-6, SpEd 1-6

The above named candidate is applying to student teach during the _____ 200 ____ semester. Please comment on the candidate's preparedness in terms of knowledge, skills, and dispositions to engage in student teaching.

Please return this form as soon as possible to the Department of Education, Campus Hall #331.

_____ **I recommend** (comments):

_____ **I do not recommend** (comments):

_____ **I wish to confer with the Coordinator of Student Teaching about this candidate.**

Signature