

*Sonoma State University
Department of Curriculum Studies and Secondary Education
Single Subject Credential Program -- Student Teacher Placement Fair*

OBSERVATION and STUDENT TEACHING PLACEMENT REQUEST
Spring 2009 and Fall 2009

Please print clearly

Name: _____ Subject Area: _____

Complete Address: _____

Home Phone: _____ Work Phone: _____

Email: _____ Student ID: _____

School Preferences: *Rank 1st choice - 5th choice; two of your choices must be middle schools*

- | | |
|----------|--|
| 1. _____ | Comments/Special Requests: (use back if necessary) |
| 2. _____ | |
| 3. _____ | |
| 4. _____ | |
| 5. _____ | |

Requirements: It is your responsibility to submit the following documents to the Credential Office before beginning your observation/participation placement (EDSS 443):

- | | |
|---|---|
| * Negative TB Exam results | * Certificate of Clearance/Emergency Permit filed |
| * Subject Matter in progress | * Proof of Registration for CBEST |
| * Completion of School of Education Legal Seminar | |

For second semester student teachers only:

In which school were your observation/participation hours completed? _____
Brief explanation why you did not continue in the same class: _____

The following must be completed before 458: *Please circle the requirements that have been successfully completed. Items #1-5 must be on file in the Credentials Office. If not, indicate the anticipated date of completion. It is your responsibility to submit these documents.*

- | | | | |
|--|------------|----|-----------------------|
| 1. Valid Negative TB results | Yes | No | Date: _____ |
| 2. Certificate of Clearance / Emergency Permit | Yes | No | Date: _____ |
| 3. CBEST Passed | Yes | No | Date: _____ |
| 4. Subject Matter Competency Met (check one) | | | |
| a. a. exam - CSET/MSAT or Praxis | Yes | No | Date: _____ |
| b. b. waiver program | Which one: | | _____ |
| 5. Completion of School of Ed Legal Seminar | Yes | No | Date: _____ |
| 6. Portfolio Interview | Yes | No | Date: _____ |
| 7. Successful completion of 443A: | Yes | No | 443B Instructor _____ |

**Please return this form to Michael Lesch, Dir. of Field Placements, Single Subject Program
Stevenson 1078 or by FAX to (707) 664-2483.
You will NOT be placed if you do not complete and return this form.**