

Job-Referenced Literacy Practicum Proposal Form

If you employed in a local school/agencies and wish to complete your fieldwork hours <u>in a classroom of a colleague</u> who is the assigned teacher of record, you may request to complete a job-referenced fieldwork placement. The classroom setting must meet the requirements for both the course and New York State.

- Requests for a job-referenced placement must be received **prior** to the end of the first week of class.
- Complete an <u>attendance verification log</u> electronically using the School of Education Attendance Verification Database.
- Placement must be with a certified literacy teacher who is servicing in the role of a literacy specialist.

Teacher Candidate Information

Student Name:	Student ID#:	
Program:	Semester/Year	
Select the course(s) you are taking this semester.		
Course: LTED 612 Literacy and the Diverse Learner		Hours Required: 20 Hours
Course: LTED 643 Intro to Literacy Assessment, Evalua	tion & Instruction (Elementary)	Hours Required: 10 Hours
School Information:		
District:		
Name of School/Agency:		
School/Agency Address:		
City	Zip	Code
Administrator's Name		
Administrator's Email		
School-Based Teacher Educator Information:		
School-Based Teacher Educator's Name		
School-Based Teacher Educator's Email		
School-Based Teacher Educator's Certification Areas		
Classroom Information		
Crada Laval(a)		

Please return this form to the Office of Clinical Experiences and Partnerships via email: fieldexp@naz.edu

Student Population: (Check all that apply)		
General Education Students	Students with Disabilities	Gifted and Talented Learners
English Language Learners	Bi-Lingual Learners	Other
Please write a detailed paragraph explainin	g your colleague's classroom setting me	eets the course requirements.
	School Administrator Approval	
Your signature below confirms the approval	- -	
Administrator's signature		Date
School-Based Teacher Educator's signature	Date	
	Nazareth College Official Use Onl	<u>v</u>
The proposed job-referenced placemen	t is approved.	
The proposed job-referenced placemer	t is denied.	
Additional Comments		
Name of Nazareth Program Director	Nazareth Program Director's sig	gnature Date
Name of Office of Clinical Experiences And Partnerships Director	Office of Clinical Experiences an Director's Signature	d Partnerships Date