



SCHOOL OF EDUCATION

Job-Embedded Fieldwork Proposal Form

If you employed in a local school/agencies and are the assigned teacher of record for the classroom, you may request to complete a job-embedded fieldwork placement. The classroom setting must meet the requirements for both the course and New York State.

- Request for job-embedded placement must be received prior to the end of the first week of class.
Each course with related fieldwork must have a separate Job-Embedded Fieldwork Proposal Form.
The number of hours you are able to complete as a job-embedded fieldwork placement may be limited based on program and certification requirements.
Complete the job-embedded field attendance verification form and have it signed by your colleague during each visit.

Teacher Candidate Information

Student Name: Student ID#:
Program: Semester/Year
Course: Hours Required for Course:

School Information:

District:
Name of School/Agency:
School/Agency Address:
City Zip Code
Administrator's Name
Administrator's Email

Classroom Information:

Grade Level(s)
Type of Classroom: (Check all that apply)
General Education Classroom I-COT Classroom (Integrated Co-Teaching) Self-Contained Classroom
Resource Room Other

Student Population: (Check all that apply)

Students with Disabilities Gifted and Talented Learners English Language Learners
Bi-Lingual Learners Other

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

Content Area(s): *(Check all that apply)*

English (ELA)

Social Studies

Math (specific area: _____)

Science (specific area: _____)

Other _____

Additional Information

Please write a detailed paragraph explaining your classroom setting meets the course requirements.

Have you done job-referenced/job-embedded in a previous semester?
*If yes, please list the **course number**, **semester**, and **school name** if applicable.*

School Administrator Approval

Your signature below confirms the approval of this job-embedded/job-referenced placement.

Principal or Director's signature

Date

Nazareth University Official Use Only

The proposed job-embedded placement is approved.

The proposed job-embedded placement is denied.

Additional Comments

Name of Nazareth Program Director

Nazareth Program Director's signature

Date

Name of Office of Clinical Experiences
And Partnerships Director

Office of Clinical Experiences and Partnerships
Director's Signature

Date