

## Part I - STUDENT TEACHING GENERAL INFORMATION

Carefully type this entire form ar<u>efint single-sided</u>
Applications will be processed in the order they are received.

STUDENT TEACHING SEMESTER:	FALL	SPRING	YEAR:		
NAME:		_MAJOR:			_
WIU EMAIL ADDRESS:	V	<u>V</u> IU ID:			_
HOME ADDRESS:					
Street		City	State	Zip	
YOUR WIU ADDRESS:Street		City	State	Zip	
CELL #:	ALTERNA	ATIVE #:			_
" I understand I am strongly discouraged student teaching assignment requirement assignment.					
" I realize that it is my responsibility to kn and financial obligations and that receive fulfilling this responsibility.					
" I authorize the WIU Student TeacbilPro	gram to release	related information	n upon request o	f the school distri	ct.
" I understand I am required to provide n using my personal auto, I am covered to to legally operate my vehicle in Illinois a	by valid auto insu	rance that provide	es at least the lim		
Student Signature			Date		
Recommend for student teaching					
Acade	emicAdvisor Si	gnature	Date		
For Office Use Only: Candidate's name did r National Sex Offender Registry or ISP Child					gistry, the
		Date	Advisor	· Initials	

## Part II - STUDENT TEACHING PLACEMENT INFORMATION

Carefully type this entire form an<u>wint single-sided</u>

Applications will be processed in the order they are received.

NAME:		WIU ID:
Δη	ticinated Joh Placement	
All	ticipated Job Placement	
Name of School		
City/Town		

" Requirements for different majors: