Preregistration Checklist for Student Teaching

signing the preregistration form for the Professional Semester.

You must complete all requirements prior to being placed for student teaching.

Instructions:

Enter "yes" in the "Requirements Met" column if the requirement will be met upon successful completion of your currently enrolled semester. Your advisor must verify these responses.

Enter "no" after any requirement that will not be met in the normal completion of your semester. Outline your plans for meeting this requirement below and attach this form to the copy of your pre-registration filed in the Neff Education Center.

Note: Advisors must verify these responses from transcript or WebAdvisor information prior to

	Requirements for Student Teaching:	Requirements Met		
	earned the minimum required cumulative GPA for my program	□ YES	NO □	
	earned the minimum required major GPA for my program	□ YES	NO □	
	completed all required professional courses (PRACTICUM and EDUC 445 may be taken in the semester immediately following student teaching.)	□ YES	NO 🗆 NO 🗆 NO 🗆	
	completed all early field experience as required (114, 115, 116)	□ YES		
	earned Senior status or have been accepted in a graduate program	□ YES		
	passed Praxis I	□ YES		
	Passed English Proficiency or English 199 (English/IE majors only)	□ YES	NO □	
Stude Actio	ent Name: Date: on to be taken to meet requirement:			
Actio	ent Name:			
Date Stude Note not b guara when	on to be taken to meet requirement:	equirements. of this plan or Student Te Teaching wh	loes not aching nen you	

Application for Stu				<u> </u>				er, Emory o	& Henry Colleg
Name:		Grad	uation Da	te:		□Under	graduate	□Graduat	e
Campus Mailbox num	nber	E-ma	ail address	:					
Local Address:									
Геlephone number									
Please circle "yes" o	r "no" for each question	:							
łave you taken and p	assed the Praxis I?						yes	no	
Have you completed a	all required Early Field Ex	perienc	e courses	?			yes	no	
Can you provide your	own transportation?						yes	no	
Regarding Praxis II,	, what is your status? (Ci	rcle on	e)						
1. Taken and passed	2. Registered	3. Not	Registere	d					
If you did not circle 1	above, please enter the da	ate on v	vhich you	plan to ta	ake Pr	axis II:_			
What courses (besides	s student teaching) do you	lack in	your prog	gram?					
In which subject area(Secondary students list	(s) and/or grade levels do st your major(s).	you see	k teaching	g endorse	ment?	Elemen	ntary stude	ents list your	content area(s).
Please circle the grade of children that you i	e level(s) most wish to teach: K	1	2 3	4 5	6	7 8	9	10 11 12	1
What semester do you State any significant h	plan to student teach? nealth problems:	Fall		Spring		Year:_			_
Placement Needed st Placement:	(check all applicable field	ds)							
Grade	Sul	ubject (if applicable) Special					Special l	Ed?	
K 1-5									
Middle School				_					
High School				_					
2 nd Placement: Grade	C1	siaat (if	applicabl	2)			Special l	E49	
rade K	Sui	oject (II	аррисаві	e)			Special	Eu?	
1-5									
Middle School				_					
High School				_					
Schools Attended			T	ı					
Schools Attended	School		State	N	Iajor		Type of Degree	Grad Year	Dates of Attendance
Elem/Middle	Belloof		State	1,	iujoi		Degree	Tear	7 Ktchdanee
Middle/High									
401 Education Pra	ecticum								
Semester		School			Grade Level		Subject(s)		
noral turpitude, or of the conduct a background in or civil convictions, driv Department. I waive my with the requested release tatement made in this a By submission of this	pplication for Student Teachi e sexual molestation, physica nvestigation and authorizes re- ving record, schools or emplo- right of access to this inform- se. I certify that information i pplication or in attachments a application for student teachi am placed for student teachi	I or sexual elease of yers, per sation, and this apto it will hing, I ag	inla abuse, or information is onal and produced to polication is be sufficie	r rape of a n in conne profession he Departs s true and nt cause to	child. ction val refer ment an comple o deny	My sign with this ences, ar and the re- ete, and to my appli	ature below application ad other sou ference sou hat I unders cation or to	v authorizes the line investigation arces considered arce from any lestand that any or dismiss me f	ne Department to n may include crimined appropriate by the iability associated false or misleading from student teaching
Signature:								Date:	
Advisor Notes:									