College of Education

Candidate Clinical Experience Request Form (E)

This form must be completed and emailed to each clinical site (school, tutoring center, etc.) individually. Do not send our mass emails to clinical sites.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (day request was sent) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Southeastern email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Course name and number: \_\_\_\_\_\_\_\_\_ Faculty instructor/professor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Purpose of guided observation or direct teaching: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade requested (be specific):\_\_\_\_\_\_\_\_\_\_\_\_ (1st preference) \_\_\_\_\_\_\_\_\_\_\_\_ (2nd preference)

Subject requested:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (1st preference) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (2nd preference)

Check: \_\_\_\_Regular Education

 \_\_\_\_ Special Ed (check) \_\_\_inclusion \_\_\_\_self-contained \_\_\_\_resource \_\_\_\_gifted

Check: \_\_\_\_ Guided Observation Only \_\_\_\_ Direct Teaching (Tutoring) \_\_\_\_ Both

The number of hours requested \_\_\_1 hr \_\_\_2 hr(s) \_\_\_3 hr(s) \_\_\_4hr(s) \_\_\_5 hr(s) \_\_\_ Other

**\*You may not request more than 5 hours at any one site unless it is a course requirement and you are instructed to do so by your instructor/professor.**

Deadline date of field assignment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Requesting Single Visit: (This section is for visiting one time)**

Potential dates & times requested. (Give specific dates and times i.e. Tues., Sept 7th 9-11 a.m.)

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(1st preference)
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(2nd preference)
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (3rd preference)

**Requesting Multiple Visits: (This section is for scheduling multiple visits at one site)**

How many visits are you requesting? Circle one: 1 2 3 4 5 6

Potential dates & times requested. (Give specific dates and times i.e. Tues., Sept 7th 9-11 a.m.)

 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Cooperating teachers MUST have a valid Louisiana teaching certificate, 3 years of teaching experience, and must model best practices.*