**Deaf & Hard of Hearing Student Teaching (SPED 897D)**

Application Information

**Applications are due as part of the student teaching placement process. Please note: If you are completing your student teaching “on the job” (i.e., paid practicum), you only need to complete pages 1 & 2 of the Student Teaching application (i.e., “Student (and Employer) Information and Advisor Approal”).**

* You will be required complete a second criminal background check prior to beginning the student teaching experience if your previous check is older than 12 months. The Director of Professional Experiences will contact you regarding this requirement after your application has been received.
* Please notify the Office of Field Experience in 116 Henzlik Hall with any changes in contact information.

The application may be downloaded from the website. Click **Student Resources**, then **Practicum and Student Teaching**. Read through the information and apply where it says **Deaf & Hard of Hearing Student Teachers APPLY HERE.** Please also note that some pages of the application require signatures so you will need to print them out, have them signed and scan or deliver them to 116 Henzlik for submission of your final application.

If you have questions concerning your application contact:

Dr. Sara Skretta Susie Kreiter Kendra Marker

sskretta2@unl.edu mkreiter1@unl.edu kmarker5@unl.edu

**Student Teaching - Deaf & Hard of Hearing**

**Rules and Policies**

1. You are expected to follow the calendar of the school and district in which you will student teach and be present on all days your cooperating teacher is on duty. The Office of Field Experiences & Certification will determine the beginning and ending dates of the student teaching experience. The first day of student teaching is dependent upon the schedule of the cooperating teacher with whom you are placed.
2. As part of the professional expectations of student teaching, you are required to be in attendance and

prepared every day, as well as follow the schedule of your cooperating teacher.

1. You are expected to participate in student teaching course activities at the university as scheduled. These days are shared with you by the University and are excused absences.
2. You must be registered for student teaching credit hours. You will receive an email with the information you need to register, including course numbers, call numbers and credit hours.
3. Student teaching is considered a full-time endeavor and should be your top priority. It is expected that there will be no conflicts with your daily schedule.

G. In some districts there is an opportunity to be a “local substitute.” Policies and procedures regarding this

opportunity vary from district to district. If you are interested in pursuing this program you need to contact the system where you hope to be assigned to student teach to determine whether that district allows local substituting. If so, you must complete their process to receive a certificate . Local substituting is generally limited to no more than **three days** during the student teaching experience and counts toward your total number of absences.

H. If you are cited for an incident that could lead to a misdemeanor or felony conviction during your student teaching experience, you must report the incident immediately to Dr. Skretta, Certification Officer (sskretta2@unl.edu).

I. An electronic copy of the Student Teaching Handbook is available on the “Practicum and Student Teaching” page of the CEHS website. You will be responsible for the contents of the handbook when you begin your student teaching assignment.

**Application for Student Teaching- Deaf & Hard of Hearing**

 **Directions**

The following documents are required\* to complete your application and should be submitted with the rest of the application. They will be sent to your cooperating teacher to introduce yourself and share your qualifications.

\***If you are completing your student teaching “on the job” (i.e., paid practicum), you only need to complete**

**Cover Letter**

The cover letter is your chance to make a positive first impression with your cooperating teacher. This document will allow you to demonstrate your ability to express yourself and stimulate interest in your background and qualifications. **The cover letter is forwarded to your cooperating teacher.**

Please reference the Career Services website (<http://www.unl.edu/careers/coverletters>) for tips and examples as you prepare your cover letter.

**Resume**

A resume is more than merely a list of experiences. It tells an administrator and cooperating teacher that you are qualified to be a student teacher AND potential employee. It is an important document in moving forward in your profession and is shared with your cooperating teacher.

Please visit the Career Services website (<http://unl.edu/careers/resumes>) and use the resume worksheet in preparing your resume. **The resume is forwarded to your cooperating teacher.**

**Application for Student Teaching- Deaf & Hard of Hearing**

**Student (and Employer) Information**

College of Education & Human Sciences

University of Nebraska-Lincoln

Applications for student teaching must be received at least 8 weeks prior to when you anticipate starting your placement to allow contractual processes to be completed. **Return completed application to Dr. Thomas for advisor verification.**

*Answer the following questions on the basis of work you* ***will have completed*** *when you begin student teaching.*

Name UNL Identification #

 First M.I. (Maiden) Last

Lincoln Address Zip Phone

Permanent Address

 Street City State Zip

Phone Email

**If completing student teaching “on the job”, please complete the following information:**

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City State Zip

Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name Email Phone

**For Office Use Only**

Application approved date GPA

Application not approved

**Application for Student Teaching - Deaf & Hard of Hearing**

**Student Services Advisor Approval Sheet**

Student Name

UNL ID:

The above named student has met the following requirements and is cleared to student teach (please check the appropriate spaces):

Praxis II- DHH Exam Passed: Yes No

All content coursework completed? Yes No

All methods coursework completed? Yes No

Grade Point Averages:

 Overall GPA of 2.75 or higher

Coursework in progress at time of application & timeline for completion (***all content and professional courses must be completed prior to student teaching***):

Comments/Concerns:

**-------------------SECTION BELOW TO BE COMPLETED BY ADVISOR----------------------**

Cleared for student teaching Yes No

Advisor Name:

Advisor Signature: Date:

UNL ID #

**Application for Student Teaching- Deaf & Hard of Hearing**

**Health Information**

Answers to these questions are voluntary and will in no way be used to discriminate in assignments. The purpose is to find the best possible placement for each student and accommodate any health conditions.

Name:                   \_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_

 First M.I. (Maiden) Last

            \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Lincoln Address Phone

Person to be notified in an emergency:

Name       Phone:

Address City State Zip

Do you have a health condition that should be considered in your student teaching placement? If so, please provide additional information below to aid UNL in finding the best possible and/or accessible locale for you.

Date Signature

**Student Name**

**Application for Preference**

**for Student Teaching Assignment**

The College of Education & Human Sciences is committed to a program that provides pre-service teachers with a quality experience. To ensure an objective evaluation, individuals will not be placed in settings in which personal relationships could interfere with their student teaching experience. Therefore, ***individuals may not student teach in a school they attended or in which a family member works or is a student.***

Please identify the schools that you attended and/or at which you have family members on the staff OR where family members are students. This will assist us in making appropriate school assignments.

 **District(s)**

 **Elementary Schools(s)**

 **Middle/Junior High(s)**

 **High School(s)**

The Office of Field Experiences has the sole responsibility of contacting school districts to seek the placement of individual student teachers. ***Student teacher candidates who will be placed out of the state of Nebraska are allowed to contact a district, the administration, and the appropriate teacher to first seek a placement.* This information should be shared with the Certification Officer** (Dr. Sara Skretta – sskretta2@unl.edu) **after the initial contact has been made. Dr. Skretta will then make the additional arrangements required for the placement to be confirmed and verified by this office.**

The Field Placement & Certification Office will use your preferred choice for your student teaching assignment based on the information you provide on the following page. While every attempt is made to honor your first choice, it is important to understand that individual school districts and the schools within them determine the acceptance of student teachers. As a result, you may be placed in your second or third location choice.

**Preference for Student Teaching Assignment**

**Step 1**

Check the line below that identifies the district in which you hope to student teach or rank the districts in the order in which you wish to student teach.

\_\_\_\_\_ **Within the State of Nebraska**

 **District Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **School Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_ **Outside of the State of Nebraska**

 **District Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Administrative Contact Information\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Cooperating Teacher Preference\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\*Your out of state placement is dependent upon finding a University supervisor in your area. You may be asked to assist in finding a qualified supervisor.***

**Step 2**

Indicate the school and/or grade level in which you would like to be placed within the district you selected above. Please include a 2nd preference as well.

**Preference: School Grade/Subject**

**2nd Preference: School Grade/Subject**

**Step 3**

Indicate the cooperating teacher with whom you’d like to work. If you do not have a specific teacher in mind, please leave this blank.

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