



School District U-46 Clinical / Student Teaching Placement Form*

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Date Submitted to U-46:

University:	
Student Name:	
Student Date of Birth:	
Home Address:	
City/Zip:	Cell Phone # District Employee: Yes <input type="checkbox"/> No <input type="checkbox"/>
Horizons4U Participant: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Graduation Date:	Observed in U-46: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when:
Student Email:	
University Student Teacher Coordinator:	
University Coordinator Phone #:	University Coordinator Email:
Requested Clinical Dates: <input type="text"/> to <input type="text"/> Observation: <input type="text"/> # of Hours: <input type="text"/> Student Teaching: <input type="text"/> Related Services: <input type="text"/> # of Hours: <input type="text"/>	Add'l Clinical Dates (if applicable): <input type="text"/> to <input type="text"/> Observation: <input type="text"/> # of Hours: <input type="text"/> Student Teaching: <input type="text"/> Related Services: <input type="text"/> # of Hours: <input type="text"/>
Grade/subject:	Grade/Subject:
Grade Level:	Grade Level:
Type of Classroom: Gen Ed <input type="checkbox"/> Sp-Ed <input type="checkbox"/> Bilingual <input type="checkbox"/> ESL <input type="checkbox"/>	Type of Classroom: Gen Ed <input type="checkbox"/> Sp-Ed <input type="checkbox"/> Bilingual <input type="checkbox"/> ESL <input type="checkbox"/>
School:	School:
Cooperating Teacher Name: <input type="text"/>	Cooperating Teacher Name: <input type="text"/>
Accept: <input type="checkbox"/>	Accept: <input type="checkbox"/>
Teacher Email: <input type="text"/>	Teacher Email: <input type="text"/>
School Admin: <input type="text"/>	School Admin: <input type="text"/>
Accept: <input type="checkbox"/>	Accept: <input type="checkbox"/>
School Address: <input type="text"/>	School Address: <input type="text"/>
City/Zip: <input type="text"/>	City/Zip: <input type="text"/>
Phone Number: <input type="text"/>	Phone Number: <input type="text"/>
Date Approved: <input type="text"/>	Date Approved: <input type="text"/>

*Submitting this form does not guarantee a placement.