**Field Placement inquiries are facilitated through the PSU College of Education Field Placement Office. You may not seek your own placement or have conversations with districts, administrators or teachers about a placement possibility. Please wait to be contacted by a School District or the Field Placement Office.**

**Information provided will be shared with public school personnel.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **OFFICE USE ONLY** | | | | | |
| **Term(s) Requested:** |  | **Cohort Leader(s):** | **Claudia Meyer** |  | **Practicum** |
| **Hours per Term:** | **40 hrs/week** | **Site:** | **SLP requested:** |  |  |

**Name:** ­ **PSU ID:**  **Term/Year Admitted:**

(Last) (First) (MI)

**Address:**

(Street) (City) (State) (Zip)

**Preferred Email:** **Preferred Phone:**   **Cell**  **Home**  **Work**

**If any of your contact information above (including name) changes, notify the Field Placement Office immediately.**

|  |  |
| --- | --- |
| **PSU SPHR Program:** |  |
| Full-time Speech and Hearing  Elementary  Secondary |  |
| Part-time Speech and Hearing  Elementary  Secondary |  |
| \_\_ Early Intervention / Early Childhood |  |
|  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Educational Background:** | | | | | |
| High School/College Attended | City/State | Major | Degree Earned | Dates | |
|  |  |  |  | |  |
|  |  |  |  | |  |
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| --- | --- | --- | --- |
| **Experience working with school-age children (list most recent first):** | | | |
| School or Agency | Dates | Length of Experience  (hours, days, months) | Responsibilities (Be specific) |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Work or Military Experience: | | | | |
| Position Held | Type of work | Company or Organization | Location | Dates |
|  |  |  |  |  |
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|  |  |
| --- | --- |
| **Activity/Sport:** | List:       Organization (if applicable): |
| **Foreign Languages:** | List:       Proficiency (check all that apply):  Read  Write  Fluent |
| **Experience with ELLs:** | Yes No Where: |
| **Other relevant experiences not listed above:** |  |

**\*\*\*Please initial that you have read and understand the following.\*\*\***

**I understand that before I can be considered for placement, I must**:

  Complete all background checks required by the SPHR program

  Submit this form to the Field Placement Office.

**I understand** that district policy may not allow for placement in a school which I attended, or in which a family member works or attends.

**I understand** that districts may require additional background checks to ensure a placement.

**I understand** that I am not to have contact with a specific placement supervisor/cooperating teacher, principal, or district personnel, and shall not make any arrangements with a school district for my student teaching placement. Violation of this protocol could be cause for loss of my school placement.

Your typed name below signifies agreement to the above statements and authorizes the College of Education to use its discretion in providing your personal information to districts and/or schools to assist in the placement process.

**Signature: Date:**

**SUBMIT COMPLETED ELECTRONIC FORM TO:**

**Andi Pearson, Field Placement Coordinator, apearson@pdx.edu**

**College of Education – Fourth Avenue Building**