



Teacher Education Program

PRACTICUM PLACEMENT REQUEST FORM

REQUEST DUE DATES: Graduate Teacher Education/ First Friday after classes begin.

PLEASE INDICATE THE TYPE OF PLACEMENT YOU NEED:

___ ED 110: 60 HOURS (RCW-90 HOURS IN MAY TERM)

___ ED 300, 310, 322: 30 HOURS

___ **GTE/MAT: 35 HOURS** ___ **GTE/MAT: 70 HOURS**

___ **GTE /MAT: ED 510** ___ **511** ___ **512** ___ **513** (Each section = 35 practicum hours)

Mary Baldwin College works closely with local school districts to secure appropriate placements for student teachers. You will be notified by your regional placement official as soon as a placement is secured. We appreciate your patience.

Name: _____ MBC email Address _____

MBC ID# _____ Advisor: _____

Check the program in which you are enrolled: ___ RCW ___ ADP ___ PBTL ___ **GTE/MAT**

Area of endorsement in which you are seeking licensure:

Early Education (PK-6) _____

Middle Education (6-8) _____ Language Arts _____ Social Studies _____ Mathematics _____ Science _____

Secondary Education (6-12) _____ Subject Area _____

Special Education for the General Curriculum K-12 _____

GTE Only / Add-on Endorsement Gifted Education (K-12) _____

SCHOOL DIVISION REQUESTED _____

First Choice : School _____
 Grade Level _____
 Teacher requested (not required) _____

Second Choice: School _____
 Grade Level _____
 Teacher requested (not required) _____

___ **If you will be completing your practicum in your own classroom with a provisional license, or in a classroom in which you work as a paraprofessional, please indicate this and provide your principal's signature below.**

Principal _____ **Date** _____

Virginia law requires that students answer the following questions:

Please note that your school system may have additional background check requirements before you are permitted to begin your student teaching placement.

Have you ever been convicted of a felony? _____ Yes _____ No (If yes, please contact your advisor)

Have you ever had a teaching license revoked or suspended in Virginia or another state? _____ Yes _____ No (If yes, please contact your advisor)

Student Signature _____

IMPORANT REMINDERS

- ✓ Remember that placements, once assigned, are not negotiable. Plan carefully.
- ✓ Many school systems now require a health and criminal background check. Comply with these requirements as soon as possible so that the beginning of your placement will not be delayed.
- ✓ Your Personal Information Form will be sent to the school where you are placed. Please complete it with care.

**Please submit your placement request to the Education Field Experience Coordinator at your
MBC Regional Center:**

Charlottesville / Staunton-Ms. Becky Dick

Edmondson House
Mary Baldwin College
Staunton VA 24401
bdick@mbc.edu
540-887-7298
540-887-7184 FAX

Richmond

Ms. Annette Wallace
mwallace@mbc.edu
804-282-9111
804-282-9138 FAX
1504 Santa Rosa Road, Suite 202 Richmond VA 23229

Roanoke

Ms. Joyce Franklin
jfrankli@mbc.edu
540-767-6170
540-767-6176 FAX
108 N. Jefferson Suite 816
Roanoke VA 24016

South Boston- Ms. Sandra Bagbey

820 Bruce Street
South Boston VA 24592
sbagbey@mbc.edu
434-572-5472
434-572-5473 FAX



Personal Information Form
(Please type)

Student Name: _____

Address: _____

MBC email address _____ Telephone number _____

Classroom experience including practica: _____

Other experiences working with children: _____

Additional work experience: _____

Special abilities, interests, hobbies, distinction: _____

Educational History:

College: _____

Degree: _____ Major _____

Date Conferred: _____

Seeking Licensure in the following:

Elementary Education PK-6 ____

Middle Education 6-8 ____

Concentration _____

Secondary Education 6-12 ____

Subject Area _____

Special Education for the General Curriculum K-12: ____

Please write a brief statement (one page or less) explaining why you are choosing teaching as a profession. Please include this statement with your personal information form.

