



MASTER OF ARTS IN TEACHING PROGRAM

TO: MAT Student

FROM: Susan Britton, Assistant MAT Director, 540/887-7186, sbritton@mbc.edu

RE: Special Practicum Placements: Teaching Assistants  
Provisional License  
Certified Teachers Seeking Additional  
Endorsement (150 instructional hours)

Each year, many students are being hired as teaching assistants, teaching with a provisional license, or certified teachers seeking an additional endorsement area who want to use their place of employment to meet the practicum requirement. I am glad to approve such placements only if the employment meets the area of endorsement you are seeking.

**Important:** You **must contact me each semester to gain approval** for such a placement.

I appreciate your help on this matter.



**MASTER OF ARTS IN TEACHING PROGRAM**

**Practicum Experience: Teaching Assistants and/or Students with Provisional/Conditional License**

Please note the following information:

- If a student is using a teaching assistant position or teaching with a provisional/conditional license and wants to use the place of employment for the practicum requirement, please submit this form to the Assistant Director of MAT.
- A student will still need to submit a practicum request form to the Coordinator of Field Placements; however, please write across the top that you will be using your place of employment (**pending approval of the MAT Assistant Director**) and fill in the location information.

**Important:** If the teaching assistant position or provisional/conditional license is different from the area of endorsement that you are seeking, you may use your school system of employment to complete the required practicum hours. Please keep the MAT office apprised of your plans.

**Special Education:** The Special Education license is for K-12; therefore, it will be necessary for a student to gain experience outside your current position to satisfy the practicum experience at all three levels; elementary, middle and high school.

**NAME** \_\_\_\_\_

**SCHOOL SYSTEM / NAME OF SCHOOL**

---

**GRADE LEVEL OR SPECIAL EDUCATION** \_\_\_\_\_

**AREA OF ENDORSEMENT: PK-6** \_\_\_ **6-8** \_\_\_ **or Special Education** \_\_\_

**SEMESTER:**                      **FALL** \_\_\_ **YEAR** \_\_\_  
    **SPRING** \_\_\_ **YEAR** \_\_\_

**\*\*\*\* Submit practicum journal and journal reflection form to your advisor.**

**\*\*\*\* Submit the clock hour and journal reflection form to the MAT office.**