**STAFFORD COUNTY PUBLIC SCHOOLS**

31 Stafford Avenue

Dr. William C. Symons, Jr.

Acting Superintendent

Superintendent

Stafford, Virginia 22554-7246

Phone: 540-658-6000

**Directions for Completing Student Teacher Placement Form**

Please complete the form by filling it out electronically and have the coordinator at the university e-mail the completed form to the coordinator at Stafford County Public Schools. **Please do not fax or send hand written forms to SCPS coordinator.**

**For the placement type please only choose one placement type.**

**Practicum Placement**

* SCPS defines as either observation only or observation with some teaching, usually these practicum placements are between 10 to 75 hours. Check the box that is most appropriate to the placement that is needed.

**Student Teaching Placement:**

* SCPS recognizes that student teaching is a placement that requires at least 7 to 16 week placement. Please check the most appropriate placement box for which semester the student teacher needs to complete his/her student teaching. Make sure to fill in the start/end date and how many hours are needed. If the student teacher requires both a fall and spring assignment, then make sure that both fall and spring semesters are checked and start/end date and hours needed are filled in.

**Internship Placement:**

* For internships, please choose the most appropriate box whether the placement is for a student seeking an administration, counseling or student services internship.

**For Grade Level and Subject:**

* For Elementary Placement, please check the box that fits this placement. Make sure that if you need both a Pre-K-3rd and upper elementary placement that the “Need both a Pre-K and 4th-5th grade placement” box is checked.
* For Secondary placements, please fill in the subject that you need for either middle or high. For students that need two placements one in middle school and high school, please fill in both boxes with the subject that you need to be placed in.
* For students that need to have a multiple setting placement (example: a student needs to observe in both an elementary and a secondary setting, or a middle and high school setting), please check “Yes.” If you have selected “Yes”, then please choose which two settings that you need from the next two boxes that have a drop down list for you choose which settings you need.
* Please select which setting you need to be placed in first.

**School Placement Request**

Please fill in your first three schools that you would like the coordinator for SCPS to place you at. Please be aware that we try to place students in one of the schools that they have requested, but that is not an guarantee that we will be able to do so.

**STAFFORD COUNTY PUBLIC SCHOOLS**

31 Stafford Avenue

RANDY BRIDGES, Ed.D. Superintendent

Superintendent

Stafford, Virginia 22554-7246

Phone: 540-658-6000

**Stafford County Public Schools Student Teacher Placement Request Form**

To be able to better place your student the following information is needed. Please take a few minutes and fill in the form below.

**Student Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Last Name:** | | | | First Name: | E-mail: |
|  | | | |  |  |
| **Seeking a Virginia Teaching License** | | | | **University/College** | **Graduation Date** |
| Yes |  | No |  |  |  |
| **Endorsement:** | | | | |
|  | | | | |

**Placement type (Please only select one placement type)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of Placement** | | **Start and End Date** | | **Hours** |
| **Practicum** | | | | |
| Observation Only |  |  |  |  |
| Observation with teaching |  |  |  |  |
| **Student Teaching (7-16 week placement. If you need both fall and spring semesters complete both sections)** | | | | |
| Placement for Fall Semester |  |  |  |  |
| Placement for Spring Semester |  |  |  |  |
| **Internships** | | | | |
| Administration |  |  |  |  |
| Counseling |  |  |  |  |
| Student Services  (Physical Therapist, Psychologist, etc.) |  |  |  |  |

**Grade Level and Subject**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Elementary Placement:** | | | | | | | | | | | | | | | | | | | | | | |
| Pre-K – 3rd only |  | 4th – 5th only | | |  | | Need both a Pre-K – 3rd and a 4th – 5th grade placement | | | | | | | | | | | | | | |  |
| **Middle School Placement (6th-8th):** | | | | | | | | | | **High School Placement (9th -12th ):** | | | | | | | | | | | | |
| Subject Area(s): | | | | | | | | | | Subject Area(s): | | | | | | | | | | | | |
| Do you need multiple placement settings? | | | | Yes | |  | | No | |  | Which two settings? | | | | |  | | | |  | | |
| If Yes, which setting do you need first? | | | Elementary | | | | | |  | | Middle | | | |  | | | High | | |  | |
| Do you need to be placed in a Special Education or ESL classroom? | | | | | | | | | | | | Yes |  | No | | |  | |  | | | |

**School Placement Request** (Please be aware that we try to place students in one of the schools that they have requested, but that is not a guarantee that we will be able to do so.)

|  |  |  |
| --- | --- | --- |
| **1st Choice** | **2nd Choice** | **3rd Choice** |
|  |  |  |

**After you have been assigned to a school SCPS requires that the following must be completed and submitted to the Human Resources Department before you may start to work with students:**

1. Complete the Virginia Department of Social Services/Child Protective Services Central Registry Release of Information Form. SCPS will pay the $7 fee and notarize the form for you.
2. Submit a current TB test (less than a year) or have a TB screening done by the nurse at the school you have been assigned to.
3. Be fingerprinted in SCPS HR Department.