

# EDUCATIONAL FIELD EXPERIENCE PLACEMENT REQUEST



EVANGEL UNIVERSITY  
1111 N. Glenstone Avenue  
Springfield, Missouri 65802

rev. 12/04/08

Name \_\_\_\_\_ Local Phone \_\_\_\_\_

Local Address \_\_\_\_\_ ID# \_\_\_\_\_

Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

## 1. In which course are you enrolled?

- \_\_\_\_\_ EDUC 220 Foundations of Education Practicum
- \_\_\_\_\_ EDUC 331 Math Practicum
- \_\_\_\_\_ EDUC 335 Early Childhood/Special Education Practicum
- \_\_\_\_\_ EDUC 354 Middle School Practicum
- \_\_\_\_\_ EDUC 371 Teaching Practicum
- \_\_\_\_\_ EDUC 381 Cross-Categorical Methods I Internship
- \_\_\_\_\_ EDUC 386 Cross-Categorical Methods II Internship
- \_\_\_\_\_ EDUC 397 Mid-level Secondary Practicum
- \_\_\_\_\_ EDUC 453 Communication Arts Practicum
- \_\_\_\_\_ EDUC 497 Subject Area Specialty Practicum
- \_\_\_\_\_ EDU 690 Graduate Practicum in Subject Area Specialty
- \_\_\_\_\_ MUED 343 Secondary Music Methods Practicum

## 2. What placement preferences do you have? *Placement preference is not guaranteed.*

EARLY CHILDHOOD \_\_\_\_\_ K-6 or ELEMENTARY \_\_\_\_\_ 1-6

SECONDARY: Subject Area \_\_\_\_\_

MUSIC ONLY: \_\_\_\_\_ VOCAL \_\_\_\_\_ INSTRUMENTAL (*which instrument*) \_\_\_\_\_

K-12 CERTIFICATION (Music, Art, P.E., Special Education) \_\_\_\_\_ K-6 or \_\_\_\_\_ 7-12

## 3. What is your preferred school district placement?

\_\_\_\_\_ Springfield Public Schools  
\_\_\_\_\_ Area School District \_\_\_\_\_

## 4. Do you have transportation? \_\_\_\_\_ Yes \_\_\_\_\_ No

*If yes, would you assist with taking a rider(s)?* \_\_\_\_\_ Yes (*specify number*) \_\_\_\_\_ No

## 5. Please list below the days and hours you have scheduled for your practicum.

*You need to complete 30 clock hours. Please schedule for three hours weekly.*

Days of week \_\_\_\_\_ Hours \_\_\_\_\_

## 6. Please give complete class and work schedule on back of sheet.

*Let the department office know if you have a change in your schedule.*

## ASSIGNMENT

This section will be completed when the placement is assigned. *Teacher* \_\_\_\_\_

*School* \_\_\_\_\_ *Grade level or subject* \_\_\_\_\_

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

C  
L  
A  
S  
S  
C  
H  
E  
D  
U  
L  
E

8:00 - 8:50 a.m.					
9:00 - 9:50 a.m.					
10:00 - 10:50 a.m.		Chapel 10:00 - 10:50 a.m.		Chapel 10:00 - 10:50 a.m.	Chapel 10:00 - 10:50 a.m.
11:00 - 11:50					
12:00 - 12:50 p.m.					
1:00 - 1:50 p.m.					
2:00 - 2:50 p.m.					
3:00 - 3:50 p.m.					
4:00 - 4:50 p.m.					
5:00 - 5:50 p.m.					