

\_\_\_\_\_ Today's Date

**Fort Hays State University**  
**Directed Teaching Assignment Form**

Office of Professional Services, RH 220  
Mr. Mike Karl, Director, Field Experiences  
(785) 628-5828; [mkarl@fhsu.edu](mailto:mkarl@fhsu.edu)

\_\_\_\_\_ Semester & Year

\_\_\_\_\_ Secondary (Content Area)

\_\_\_\_\_ Elementary

\_\_\_\_\_ Elementary (Special Education)

\_\_\_\_\_ Email Address during Directed Teaching

**PLEASE TYPE ALL INFORMATION.**

**Current Address**

Name _____		Student ID # _____		
Street	City	State	Zip code	Phone number

**Permanent Address**

Street	City	State	Zip code	Phone number
In case of emergency while student teaching (phone #) _____				

**Other Field Experiences (Early Field, Internships, Apprenticeship-Secondary School, Other)**

Course Title and Course #	Schools	Semester and Year
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**High School/Elementary School Graduation**

Your High School	City	State	Date of Graduation
Your Elementary School	City	State	Date of Graduation

School System Preference: ALTHOUGH THIS OFFICE WILL MAKE EVERY ATTEMPT TO HONOR YOUR REQUEST, FINAL DECISION RESTS WITH THE UNIVERSITY AND SCHOOL DISTRICT. DO NOT MAKE PLANS UNTIL YOU RECEIVE "OFFICIAL" WORD FROM THIS OFFICE.

**Placement (for office use only)**

District	_____
School	_____
Principal	_____
Teacher	_____



Name \_\_\_\_\_ Student ID # \_\_\_\_\_

High School Activities \_\_\_\_\_

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College Activities \_\_\_\_\_

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Recognition/Honors \_\_\_\_\_

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Hobbies \_\_\_\_\_

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Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Licensure Area \_\_\_\_\_

Endorsement Area(s) \_\_\_\_\_

I. Directed Teaching Level: (Select one of the following)

Elementary \_\_\_\_\_ Grade Level preferences \_\_\_\_\_  
Secondary \_\_\_\_\_ Grade Level preferences \_\_\_\_\_  
Elem./Sec \_\_\_\_\_ Grade Level preferences \_\_\_\_\_

II. Directed Teaching Site Request—List three sites in order of preference. (other than schools where you graduated or completed other field experiences).

	<u>Name of School</u>	<u>City</u>	<u>District</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

III. Reasons for choices:

Note: Some districts may require additional information from the applicant (i.e. background check, transcript, etc.)

## CANDIDATE'S STATEMENT OF INTRODUCTION

On a separate sheet(s) of paper, write (type) a letter of introduction to your cooperating teacher in which you include ALL of the following: (1) why you decided to become a teacher, (2) what inspired you to become a teacher, (3) why you chose your teaching major, (4) previous experience with children, (5) unit(s) or activities you would like to teach, (6) professional goals, and (7) additional information which you think will help your cooperating teacher know you better, including work and travel experiences.

### SAMPLE

Date

Dear Cooperating Teacher:

Body of Letter

Sincerely yours,

(Your signature)

Your typed name

**PROOFREAD**

**PROOFREAD**

**PROOFREAD**