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|  |  | | **FORM B** |
| Ohio Wesleyan University | | Department of Education | |
| **Application for Student Teaching** | | | |
| I desire approval as a student teacher in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The preparation that I have had together with further work that I am doing or plan to do is shown below. As a candidate for assignment as student teacher, my preparation | | | |
| Will be completed prior to student teaching. | | | |
| Will be completed by taking the following courses after student teaching. | | | |
| Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Departmental or Area Recommendation | | | |
| This applicant for student teaching is | | | |
| Approved | | | |
| Not approved | | | |
| Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **All Courses Planned for Senior Year** | | | |
| Semester I | | | |
| Department | Number | | Course Title |
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|  |  | |  |
| Semester II | | | |
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| Any additional coursework to be completed before graduation: | | | |