



Michigan Jewish Institute

6890 West Maple Road
West Bloomfield, MI 48322
248-414-6900, Fax: 248-414-6907

STUDENT TEACHING APPLICATION

For EDU 200 or EDU 252

(To be completed by the Student)

FOR SEMESTER _____, 2008-09 or other time period (specify): _____

Application Date: _____

Student's Name:

SS#

Email Address

Local Address

Permanent Address

Local Phone

Permanent Phone

Number of credits requested____ MJI Faculty Supervisor: _____

Course: EDU 200____ (2-6 credits) or EDU 252____ (4 credits)

Teaching Schedule: Number of Weeks:____ Days per Week: ____ Hours per Day: _____

Students receiving student teaching credits MUST enroll in EDU 200 or 252 during the semester in which student teaching occurs. The amount of credit taken should be discussed with the student teaching Coordinator at the host school and your academic advisor. Please complete **all** the requested information and return **this form**, a completed **Host School Request Form** and a signed **Student Teaching Agreement** to MJI.

All the information I am providing is correct to the best of my knowledge. If I am posted for a student teaching placement, I authorize MJI to enroll me in EDU 200 or 252 during the semester that the placement occurs for up to six credit hours as indicated above.

Student's signature

Approval signature of Dean



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HOST SCHOOL REQUEST FORM

(To be completed by the Host School Student Teaching Coordinator)

Date: _____

Host School: _____

Contact Information

Name: _____

Title: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Student Teaching Positions Available:

Number of student teaching placements desired: _____

Time period: _____ to _____

Location: _____

Rate of pay (Optional): _____

Number of Weeks: _____ Hours Per Week: _____ Total Number of Hours: _____

Preference for Overall GPA

3.5 or higher 2.5 or higher

3.0 or higher No Preference

Other (please specify) _____

Preference for GPA in Major Courses

3.5 or higher 2.5 or higher

3.0 or higher No Preference

Other (please specify) _____

Interviews will be conducted:

On MJI campus At our location By telephone

Other (please specify): _____

Please complete this request form and return to:

Dean of Academic Administration
Michigan Jewish Institute
25401 Coolidge Highway
Oak Park, Michigan 48237
248-414-6900, Fax: 248-414-6907



STUDENT TEACHING AGREEMENT

_____ (hereinafter, the Host School) agrees to host _____ (hereinafter, the Student Teacher) as a Student Teacher.

The Host School will provide the Student Teacher with a learning experience as fully described in the **MJI Teaching Practicum Program and Rubric**. The Student Teacher will work according to the hours and schedule set forth in the Host School Request Form. The Host School will verify in writing to MJI that the Student Teacher did spend the required hours and fulfilled all defined academic obligations.

At the conclusion of the student teaching placement the Host School, through the Student Teacher Coordinator and Cooperating Teacher(s), will assess the work of the Student Teacher using the forms and devices contained in the **MJI Teaching Practicum Program and Rubric**. Furthermore, the Host School will allow a faculty member of MJI full access to the Student Teacher's work with the understanding that the faculty member must respect any confidentiality requirements. If necessary, the Host School may demand that the MJI faculty member sign a non-disclosure agreement.

For the Host School

Date ____/____/____

For Michigan Jewish Institute

Date ____/____/____

Student Teacher

Date ____/____/____

APPLICATION CHECK LIST:

(Submission of this check list to MJI is not necessary. It is for your personal use)

- 1. Did you, the student, complete all items on the Student Teaching Application? ____**
- 2. Did you provide the prospective host school with a Host School Request Form ____ and a copy of the MJI Teaching Practicum Program and Rubric? ____**
- 3. Did the Host School complete the Host School Request Form and return it to MJI? ____**
- 4. Did you and the Host School Student Teaching Coordinator sign and date the Student Teaching agreement? ____**
- 5. Have you returned all the completed forms to the Academic Dean for approval? _**
- 6. Have you properly registered for a student teaching course? ____**