REGION 10
EDUCATION SERVICE CENTER

Clinical Teaching Experience (CTE) Interview Application
Fall 2012

Name:

Address: City: State: Zip:

Home Phone: Cell Phone:

E-mail address:

Request for consideration in placement: **There are no guarantees given regarding placement requests.**

Fall 2012 application deadline is **March 1, 2012**.

Certification Area:

Desired Grade Level: ☐ Elementary ☐ Middle School/Junior High ☐ HighSchool

Placement Location (please list your desired choice plus two alternate choices):

1st District Choice:

2nd District Choice:

3rd District Choice:

I have reviewed the clinical teaching online information (http://www.region10.org/TPC/PI_ROUTES.html) and am aware of my responsibilities. I also understand that I am not guaranteed acceptance into the CTE Program.

Once a placement has been confirmed with a district, I understand that I may not request a change in the placement or request to seek/accept a position for an internship.

I understand that this information will be shared with placement school districts and Teacher Preparation and Certification staff as part of the placement process. I also understand that if accepted into the CTE Program, I am not guaranteed a placement location of my preference.

Signature:_____ Date: _____
(Electronic Signature acceptable)

Please e-mail this completed form to: camela.walker@region10.org or fax to 972.348.1707