

University of Hawai`i at Mānoa

Office of Student Academic Services • College of Education
Wist Annex 2, 126 • 1776 University Avenue • Honolulu, Hawai`i
96822
Facsimile: (808) 956-4271

Student Teaching Application
Bachelor's Degree in Elementary or Secondary Education
Post-Baccalaureate Certificate in Secondary Education

To the Applicant:

Congratulations! You are about to embark on the most intensive phase of your teacher preparation program, your semester of student teaching. Admission to student teaching is not automatic. You must meet ALL minimum requirements for student teaching as outlined in the UHM General and Graduate Information Catalogue (see application form).

Student teaching and its concurrent seminar combine to make a full, demanding semester. Students are advised not to take additional courses during their student teaching semester.

Where and When to Apply:

For Fall semester – apply between January 2 to February 15 For Spring semester – apply between Aug. 15 to Sept. 15

Application forms are available in the Office of Student Academic Services.

1. Schedule an appointment with your academic advisor in the Office of Student Academic Services AFTER grades from the previous semester have been received.
2. Your academic advisor will check the student teaching application and sign it when the information has been verified. You will then be advised of your graduation/licensure requirements.

An Equal Opportunity/Affirmative Action Institution

UNIVERSITY OF HAWAII – COLLEGE OF EDUCATION

OFFICE OF STUDENT ACADEMIC SERVICES
STUDENT TEACHING APPLICATION

Instructions:

Use the checklist below before filling out the form to see if you meet or will meet the requirements. Final approval is contingent upon satisfying these requirements prior to student teaching. (see signature page)

Student Teaching Requirements:

For Elementary:

- My cumulative grade point average is at least 2.75 ___ yes ___ no
- My grades in all the required professional education courses are “C” or better ___ yes ___ no

For Secondary:

- My cumulative grade point average is at least 2.75 ___ yes ___ no
- My cumulative GPA in my major field is at least 2.75 ___ yes ___ no
- Check here if your major is math or science ___
- My cumulative GPA as a math or science major is at least 2.50 ___ yes ___ no
- My cumulative GPA in my major (math or science) is at least 2.50* ___ yes ___ no

For Special Education:

All of the above, except for grades in field training

- My grades in all the required field training courses are “C” or better ___ yes ___ no

If you answer “no” to any one of these items and/or need special accommodations, see an academic advisor from the Office of Student Academic Services as soon as possible.

**Students in Kinesiology & Leisure Science, Music, and Vocational Education must attach to this application, a memo from the program faculty for completion of academic major.*

You will need an academic advisor’s signature (OSAS) for approval of your student teaching application.

SEMESTER OF STUDENT TEACHING					
NAME (Print):			SOCIAL SECURITY NUMBER:		
DEGREE/CERTIFICATE: (B.Ed./PBCSE)		ACADEMIC MAJOR: (Secondary Education)		ELEMENTARY (check one): <input type="checkbox"/> Elem <input type="checkbox"/> Dual Prep <input type="checkbox"/> Hawaiian Lang. Imm. <input type="checkbox"/> Early Childhood	
CURRENT ADDRESS:	STREET	APT. NO.	CITY	STATE	ZIP CODE
PERMANENT ADDRESS:	STREET	APT. NO.	CITY	STATE	ZIP CODE
CURRENT TELEPHONE NUMBER:			PERMANENT TELEPHONE NUMBER:		
E-MAIL ADDRESS:					

- I understand that it is my responsibility to notify the Chair of Elementary or Secondary and Middle Level Education (SMILE) Division, in writing, should either my GPA fall below the required 2.75 or should I receive a grade of “D” or “I” for a required course(s) in the semester prior to student teaching. This written notification must be received by the Chair as soon as possible and not less than two weeks prior to the beginning of the student teaching semester
- I understand that my student teaching assignment may be cancelled if, on the date that student teaching is to begin, I do not meet all of the prerequisites and requirements for student teaching
- I understand that as a condition of placement in schools for student teaching, the College requires liability coverage. I carry liability insurance.

SIGNATURE OF APPLICANT:

Date _____

ACADEMIC ADVISOR’S APPROVAL:

Date _____