

STUDENT TEACHING PACKET

2017-2018

OFFICE OF TEACHER EDUCATION

TO BE USED FOR ONE STUDENT TEACHING PLACEMENT

IMPORTANT DEADLINES	
FALL	SPRING
Clearance Letter: Before first day of student teaching. ALL students must be cleared by Tues, Sept. 20th	Clearance Letter: Before first day of student teaching. ALL students must be cleared by Fri, Feb. 2, 2018
Record of Hours Form: Dec. 15 ,2017 (Friday) for graduates Dec. 22, 2017 (Friday) for non-graduates	Record of Hours Form: May 1 ,2018 (Tuesday) for graduates May 8, 2018 (Tuesday) for non-grads

****INTERNATIONAL STUDENTS** are exempt from fingerprinting AND registering with NYCDOE. If you are an international student, please send an email to ote@tc.edu identifying yourself as an international student teacher in order to get a clearance letter**

BEFORE YOU ENTER THE CLASSROOM:

___ Get fingerprinted (see p. 2) through NYSED **OR** NYCDOE (Choose one but you must be at the NYSED level for certification)

___ Send screen shot from NYSED website or email ote@tc.edu to check for NYCDOE fingerprint status

___ Register at www.teachnyc.net/certification/student-teaching Forward confirmation email to ote@tc.edu

___ Obtain a "Clearance Letter" from OTE after meeting above requirements BEFORE the first day of student teaching. ALL

STUDENTS MUST BE CLEARED BY SEPT. 20 (FALL) and FEB. 2 (for new spring student teachers).

___ Give the "Clearance Letter" to school principal or school administrator

___ Give "Cooperating Teacher Letter" to your host teacher

YOU CANNOT START STUDENT TEACHING WITHOUT A CLEARANCE LETTER!

****Failure to comply will lead to suspension or dismissal from your host school****

****Important Notes:*** 1) Students who complete all requirements will be cleared for the full academic year, 2) Students in the Applied Behavior Analysis program are exempt from the NYCDOE online registration requirement due to the nature of the school placements.

DURING THE EXPERIENCE

___ Track the number of hours spent at school on Time Sheet (see p. 4)

END OF PLACEMENT

___ Submit Record of Hours form (p. 3) via fax to 212.678.3153, or as a scanned attachment to ote@tc.edu, or in person at Zankel Hall, Room 411. See due dates at top of this form.

Fingerprinting Information Sheet

SELECT EITHER STATE OR CITY LEVEL FOR STUDENT TEACHING
YOU MUST BE AT THE STATE LEVEL FOR CERTIFICATION

Updated 7.2016

STATE LEVEL

(Recommended method for student teaching and mandatory for certification)

(Clearance time: 3-7 days) (Cost: \$102)

Step 1: Make an appointment via <http://www.identogo.com/FP/NewYork.aspx>
or call (877) 472-6915

➤ **The ORI Number/Code is: TEACH**

After 3-7 days have passed, follow the steps below to check the status of your prints:

- 1) Create an account at: <http://www.highered.nysed.gov/tcert/teach/>
- 2) Click on "Account Information"
- 3) Click on "Fingerprinting"
- 4) Press "Go"
- 5) Under "Fingerprint Information," it should say "Your DCJS and FBI results have been received" or "Fingerprints received from NYC" (if you have been fingerprinted previously by NYC)

*Note: Transferring fingerprints to New York City is **optional** and only needed if requested by a school (in rare instances) or for NYCDOE employment purposes. See box below for NYC level clearance (Transfer is free)*

New York City (NYC) Level

(For employment in NYC or if required by a school)

(2-5 days to clear) (Cost: \$135)

Students **MUST** bring their Social Security card to the Office of Teacher Education in Zankel, Room 411 for identity verification before being allowed to be fingerprinted.

Additional instructions will be given once this step has been completed.

INTERNATIONAL STUDENTS

***INTERNATIONAL STUDENTS DO NOT NEED TO BE FINGERPRINTED BEFORE STUDENT TEACHING (ONLY For certification)** *Step 1:* Go to <http://tinyurl.com/llwj69e> to request an ID number if you do not have a valid social security number. *Step 2:* Open a NYSED account with that number and apply and **PAY** for a certificate(s). *Step 3:* Get fingerprinted by the STATE using the same number.

(Note: You cannot use this number to be fingerprinted by NYC. Please email ote@tc.edu if you need to be fingerprinted by NYC.

Check here if you are graduating this semester

For Office Use Only
Date Received: _____

STUDENT TEACHING RECORD OF HOURS

Directions: Please use dark ink and submit via one of the following methods: 1) Email to ote@tc.edu, 2) Fax to (212)678-3153, or 3) Drop off at Zankel, Room 411.

Name of Student Teacher _____ TC T# _____

Semester & Year _____ Grade Level(s) Taught _____

Program & Course Code—Select one code from the list below: _____

Applied Behavior Analysis HBSE 4704	Deaf & Hard of Hearing HBSE 4707	English A&HE 4750 / 4751	Music A&HM 4711 (Secondary)	Social Studies A&HW 4729/ 4730
Art A& HA 4722 (Elem)	Early Childhood C&T 4708	Intellectual Disability/Autism HBSE 4701	Phys Ed BBSR 4700 / 4705	Technology Specialist MSTU 4700
Art A& HA 4702 (Secondary)	Elementary BBE C&T 4729	Math MSTM 4760	Science MSTC 4761	TESOL A&HT 4776 (Fall)
Bilingual/Bicultural Ed A&HB 4720 / 4721	Elementary Inclusive C&T 4726	Music A&HM 4701 (Elem)	Secondary Inclusive Ed (SIE) C&T 4705	TESOL A&HT 4777 (Spring)

Note: If your course is not on the above list, you should not use this form.

Name of School _____ City/Borough _____

Name of Cooperating Teacher and Email _____

Name of TC Field Supervisor _____

Check only **ONE** box: 1st Placement 2nd Placement 3rd Placement Specify Other: _____

I. TEACHING HOURS:

Teaching hours include time spent instructing or interacting with students or supervision of homeroom and study halls. **Note: The number of hours required vary by program. Individual TC program requirements typically require more hours than the minimum state regulations, so be sure to check your program requirements.**

II. OBSERVATION AND SUPPORT HOURS: (Subtract teaching hours from total hours.)

These hours might include: observing the cooperating teacher or other teachers in the school; attending professional development or staff meetings; sitting in on parent-teacher conferences (if appropriate); etc.

TOTAL NUMBER OF HOURS:

The record above represents the total clock hours recorded at the designated school site. If all the information is accurate and correct, please sign this form. Note: These hours will be recorded on the official transcript.

Signature of Cooperating Teacher or TC Faculty _____ Date: _____

Signature of Student Teacher: _____ Date: _____

Name: _____

Semester & Year: _____

Directions: Record the time you began working and finished working at your assigned school. Please round to the nearest half hour.

	Date	Time-in	Time-out	Total Hours	Teaching Hours
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
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22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
TOTAL					

	Date	Time-in	Time-out	Total Hours	Teaching Hours
36					
37					
38					
39					
40					
41					
42					
43					
44					
45					
46					
47					
48					
49					
50					
51					
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57					
58					
59					
60					
61					
62					
63					
64					
65					
66					
67					
68					
69					
70					
TOTAL					