

UNIVERSITY OF ALASKA SOUTHEAST
ALASKA COLLEGE OF EDUCATION
K-8 Certificate/MAT Elementary Distance
Attn: Program Assistant
11066 Auke Lake Way, (HA-1), Juneau, Alaska 99801
Phone: 907-796-6424/Fax 907-796-6059
Tollfree Phone: 1-866-465-6424
Tollfree Fax: 1-866-465-5159



GATE 2
Elementary MAT, Grad Cert and Endorsement (distance and local)
APPLICATION FOR STUDENT TEACHING

Name: _____ Student ID# _____
Address: _____
Phone (Day): _____ Phone (Night): _____
Email: _____

Current Employer: _____

Previous Teaching Experience or Credential:

Place: _____ Grade/Subject: _____
Position: _____ Number of Years: _____

Program of Admission: Certificate Only MAT Elementary Endorsement

Academic Advisor: _____

Student Teaching Assignment Requested (optional):

Semester: Fall _____ Spring _____

School/Location _____

Grade Level (first choice): _____ (second choice): _____

School District Student Teacher application completed:
District name: _____ Date Completed: _____

Deadlines

- To student teach during the fall semester ~ March 30th
- To student teach during the spring semester ~ September 30th

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Please complete the following to show all prerequisites for Student Teaching. If you are currently registered in a class, just note the current semester. If you are petitioning to waive a prerequisite, please write it below.

Praxis II exam:
Date _____ Score _____

DEED Student Teacher Application: Date Approved: _____

Class	Grade you received	Practicum Grade Level and School	Semester you took the class
ASLT 603			
ED 680			
EDSE 482			
ED 621A			
ED 621B			
ED 621C			
ECE 661			
ED 615			
ED 616			
ED 617			
ED 618			
ED 619			

Please list any program waiver that you request here. List the class and explain why you are requesting the waiver, and when you will complete the coursework:

Signature: _____ Date: _____

Advisor's Signature: _____ Date: _____