



# Single Subject EHD 155B Final Student Teaching / Interns Clearance Form

Semester \_\_\_\_\_  
Semester/Year

## Student Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Former Name (If applicable) \_\_\_\_\_ Student ID \_\_\_\_\_  
 Current Mailing Address \_\_\_\_\_ Email Address \_\_\_\_\_ @mail.fresnostate.edu \_\_\_\_\_ Cellphone Number \_\_\_\_\_  
 Single Subject Area \_\_\_\_\_ Music:  Instrumental  Choral  
 Subject Emphasis Area (Science Only) \_\_\_\_\_

## Field Placement Information

EHD 155A Placement: District \_\_\_\_\_ School \_\_\_\_\_  
 Mentor Teacher (if applicable) \_\_\_\_\_ Grade \_\_\_\_\_ (Freshman-Senior)  
 EHD 155B Unit Request:  EHD 155B (1st Semester 5 units and 2nd Semester 5 units) or  EHD 155B (One Semester 10 units)  
 Teacher candidates cannot be assigned to schools where their children attend or where family members are employed. Please provide the family member's school site: \_\_\_\_\_

## Final Student Teaching Information

1. All teacher candidates must:
  - a. have met the Basic Skills Requirement
  - b. have met Subject Matter Competency
  - c. have a valid Certificate of Clearance
  - d. complete credential coursework with a GPA of 3.0 (no grade lower than a "C").
  - e. attend an orientation held at the beginning of the semester. *Details will be emailed to you prior to the beginning of the semester.*
2. No more than two courses may be taken concurrently with Final Student Teaching.
3. Placements will be coordinated just prior to the beginning of the semester.
  - a. Some placement options will fill quickly and it may not be possible to accommodate specific requests for assignments.
  - b. Location requests are considered but not guaranteed.
  - c. Placements are made exclusively by the Office of Clinical Practice and must adhere to state mandates.

Teacher Candidate's Signature \_\_\_\_\_ Date \_\_\_\_\_

Once signed, keep a copy for your records.

## To be Completed by the Academic Subject Area Advisor:

Has the student established Subject Matter Competency?

Yes: \_\_\_\_\_

Indicate Method Used: \_\_\_\_\_

- \_\_\_\_\_ CSET
- \_\_\_\_\_ Subject Matter Prep Program
- \_\_\_\_\_ Completion of other approved degree
- \_\_\_\_\_ Completion of approved coursework
- \_\_\_\_\_ Completion of combination of approved coursework and CSET

•  No: Indicate how will student qualify? \_\_\_\_\_

Complete additional department subject matter competency assessment(s): \_\_\_\_\_

Academic Advisor's Recommended Placement: District: \_\_\_\_\_ School: \_\_\_\_\_ Mentor Teacher \_\_\_\_\_

Academic Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Once the form is signed, the Academic Advisor will email the form to Holly Jamison, Credential Admissions Analyst at [hjamison@mail.fresnostate.edu](mailto:hjamison@mail.fresnostate.edu).