



School of Education
Office of Clinical Experiences
(212) 772-4621

Website Address:
<http://www.hunter.cuny.edu/education>

Hunter TESOL Practicum Approval Form

To be completed by the Teacher/MA Teacher Candidate:

Name: _____

School Name: _____ School DBN: _____

Teacher's position: _____

Grade Level: _____ Subject: _____ Semester: _____

To be completed by the School Administration and Teacher/MA Teacher Candidate:

Approved TESOL Practicum positions must meet the following requirements:

1. The Teacher/MA Teacher candidate will work with English Language Learners (5+) and incorporate language instruction into their lessons on a daily basis;
2. Approval for use of video for course and certification purposes, and;
3. Approval of Hunter TESOL Clinical Supervisor observing the TESOL Candidate on language instruction.

Yes, this position meets the above requirements:

Teacher/ MA Teacher Candidate Signature: _____

Principal's Name: _____

Principal's Signature: _____