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: ____________________________________________