Office of Field Experiences

HARDSHIP PLACEMENT CHANGE FORM

Date: ______________________   Semester/Year: _______________ (i.e. Spring 2013)

Student’s Name: _________________________________   Student’s ID#:  917__________

Email Address: _________________________________   Phone Number:______________

Program/Department: ____________________________

Program Coordinator: ___________________   Department Chair: __________________

Placement Type/Course: ____________________________________________________________

Current Placement Site Assigned: ________________________   (District)   (School)

Current Placement Cooperating Teacher Assigned: ____________________________________

REASON FOR REQUESTING CHANGE: _______________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

(The following is to be completed by the Program Coordinator or Department Chair.)

The change request is:   ☐ APPROVED   ☐ DENIED

Comments:_______________________________________________________________

Program Coordinator:   Department Chair:

(Signature)   (Date)   (Signature)   (Date)

(The following is to be completed by the Office of Field Experiences Director.)

The change request is:   ☐ APPROVED   ☐ DENIED

Comments:_______________________________________________________________

Director, Office of Field Experiences:

(Signature)   (Date)

Notification of change/update:

Student: ________

Dept./Coordinator: ________

District/School: ________

Tk20: ________

Initials: ________