PLACEMENT APPLICATION FORM

Department of Human Resources
Recruitment Office
8115 Gatehouse Road
Falls Church, VA 22042

DIRECTIONS: PLEASE TYPE OR PRINT CLEARLY

APPLICATION FOR (Check one)
_____STUDENT TEACHING
_____INTERNSHIP (Circle one of the following)
Counseling Administration Other
YEAR_____
SEMESTER (Circle one of the following)
Fall Spring Summer

DATE OF APPLICATION_____

NAME_____
Last First Middle Initial

CURRENT ADDRESS_____
Street City State Zip

CURRENT PHONE Day(____)_____ Evening (_____)_____
E-mail address:_____

ADDRESS DURING STUDENT TEACHING_____
Street City State Zip

LIST ANY FAIRFAX COUNTY PUBLIC SCHOOLS YOU ATTENDED
ALSO, LIST ANY SCHOOLS IN WHICH IMMEDIATE FAMILY MEMBERS ARE EMPLOYED OR YOUR CHILDREN ATTEND

COLLEGE/UNIVERSITY_____ADVISOR'S SIGNATURE_____

CERTIFICATION AREA_____ENDORSEMENT_____

COURSES COMPLETED IN CERTIFICATION AREA

REQUIRED: ATTACH COPY OF TRANSCRIPTS, RESUME, AND TB TEST RESULTS

FOR UNIVERSITY USE ONLY

RECOMMENDATION FOR FIRST PLACEMENT

School: (Optional)

Subject/Grade Level(s):

Beginning and Ending Dates:

Cooperating Teacher(s): (Optional)

COMMENTS:

RECOMMENDATION FOR SECOND PLACEMENT

School: (Optional)

Subject/Grade Level(s):

Beginning and Ending Dates:

Cooperating Teacher(s): (Optional)

COMMENTS: