DARDEN COLLEGE OF EDUCATION
REQUEST FOR DEPARTMENTAL EXCEPTION TO
STUDENT TEACHING REQUIREMENTS

To: _____ Department Chair/Program Director for: _____
From: _____ Teacher Education Services Advisor
Date: _____

The following student has requested to be placed in a student teaching situation for the fall/spring/summer semester.

STUDENT:_____ SSN#:_____ DOB:_____

Upon reviewing the student's transcripts and your department's policies, the following requirements **have not been completed** to be approved for a student teaching placement. As a result, the Teacher Education Services office can not accept the student teaching application at this time. _____ is requesting an **EXCEPTION** to your department requirements to be allowed to student teach.

1. ____ ALL coursework has been completed except the following course(s): _____
   _____
2. ____ Required cumulative and academic major GPA. Current GPA: _____
3. ____ Missed student teaching application deadline. Was due on: _____ Current date: _____
4. ____ Other: _____

Student referred to the following department for Exception: _____

Please review the above information. Check if the EXCEPTION is APPROVED or DENIED and indicate the basis for the decision. Send the completed form with the appropriate signatures and the student teaching application to the Teacher Education Services office, Education Building, Room 152 within 5 business days of receipt to ensure timely processing. If you have any questions, please call and speak with an advisor at 683-3348. (A committee will review all approvals of student teaching exceptions).

_____ APPROVED _____ DENIED

RATIONALE:
_____
_____

Department Chair: _____ Date: _____
Signature

	Approved	Denied	Date
_____ Committee Member's Signature	_____	_____	_____
_____ Committee Member's Signature	_____	_____	_____
_____ Committee Member's Signature	_____	_____	_____
_____ Committee Member's Signature	_____	_____	_____

Rev. 10/10/07