STATE UNIVERSITY OF NEW YORK – URBAN TEACHER EDUCATION CENTER
NEW YORK CITY DEPARTMENT OF EDUCATION OFFICE
65 Court Street, Room 405 Brooklyn New York 11201

University / College Request for Student Placement
NEW YORK CITY STUDENT TEACHING

Please list all students who are requesting a student teacher placement in the New York City Public School System. Also, identify the beginning and ending dates for the first and second sessions of the placement as well as the grade levels/subjects being requested.

College / University: _____ Fall _____ Spring _____ Year _____

Assignment #1: Begins: _____ Ends: _____ Assignment #2: Begins: _____ Ends: _____

Last Name	**First Name**	**Levels:** **Early Childhood** **Childhood** **Middle Childhood** **Adolescence** **Specialty Subject (N-12)**	**Academic Discipline**	**Borough Preferences**

(Please copy this form and complete as necessary)

Are students required to take SUTEC seminars? Yes _____ (weekly or bi-weekly) No _____

Provide the date(s) above student teachers must be on campus during their student teaching term:_____

_____

_____ _____ __ __ __ / __ __ __ / __ __ __ __
(Name of Contact Person) **(Title)** **(Telephone)**

__ __ __ / __ __ __ / __ __ __ __ _____ _____
(Fax #) **(E-Mail Address)** **(Signature)**

Please return this information and SUTEC Student Teacher Application forms by mail, fax, or e-mail to:

SUTEC (SUNY Urban Teacher Education Center)
NYC Dept. of Education Office
65 Court Street, Room 405
Brooklyn, New York 11201

Phone: (718) 935-5515 Fax: (718) 935-2798 E-mail: Natalie.Lukas@suny.edu