

Content Area Verification for Student Teaching/Internship

Name:	UVID:			
Current address:Street		Nib.	State	Zip
Phone:				•
Content Area:				
NOTE: All course work m	oust be completed in both Edu Please attach a copy of your			aching.
	Students are respo	nsible for the fol	owing:	
☐ ALL education & methods course	s completed with a B- or bette	ır.		
☐ ALL content area courses comple	ted with a C or better.			
I have completed the requirements a	bove and would like to be con	e considered for student teaching/Internship. Student Signature		
Advisor Use Only:				
Have content area courses been comp	leted: □Yes □ No			
If no, please indicate when they will be	completed. □Dec 20	□Apr 20	□Summer 20	_
Content areas may add additional adm Department signature indicates that Ge		tent area requireme	nts have been met.	
			Content Area Advisor Signature	

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