

Check appropriate boxes below:

- YES** **NO**. The applicant agrees that any and all communication with students and parents shall be done only through a District-provided email account.
- YES** **NO**. The applicant agrees to not to “friend” or interact with students and parents on any and all social media websites.
- YES** **NO**. The applicant agrees to abide by all relevant Board policies and administrative guidelines.
- YES** **NO**. The applicant understand that they are not covered by the District’s health insurance policy nor are they eligible for workers' compensation. Should the applicant become ill or suffer an accident while doing their pre-student or student teaching work for the District, they agree that they shall be responsible for any and all hospital and medical charges that may accrue.
- YES** **NO**. The applicant agrees that they are not in any manner be considered an employee of the District or entitled to any benefits provided to employees.
- YES** **NO**. The applicant agrees to release the Board of Education from any and all liability for any damages, whatever their nature, which may result as a consequence of their services.
- YES** **NO**. For the protection of the children in the school, the District is required by law to inquire of its staff members whether or not they have ever been convicted of a crime related to children. We would appreciate your cooperation by indicating that you have never been convicted of any of the following offenses: aggravated murder, murder, voluntary manslaughter, involuntary manslaughter, felonious assault, aggravated assault, assault, aggravated menacing, abuse or neglect of a child, kidnapping, abduction, child stealing, criminal child enticement, rape, sexual battery, corruption of a minor, gross sexual imposition, importuning, voyeurism, public indecency, felonious sexual penetration, compelling prostitution, promoting prostitution, procuring prostitution, disseminating matter harmful to juveniles, pandering obscenity, pandering obscenity involving a minor, pandering sexually-oriented matter involving a minor, illegal use of a minor in nudity-oriented material or performance, endangering children, contributing to the delinquency of children, carrying concealed weapons, improperly discharging a firearm at or into a school or house, corrupting another with drugs, placing harmful objects in or adulterating food or confection.

It is understood that my signature below indicates my consent to a Michigan State Police background check (i.e. ICHAT) and that I have completed the application truthfully and to the best of my ability.

Pre-student/Student Teacher’s Signature

Date

Guaranteed Learning for All Students!

TO BE COMPLETED BY SUPERVISING INSTRUCTOR FROM THE COLLEGE/UNIVERSITY

Name of College or University

Supervising Instructor's First and Last Name

Supervising Instructor's Telephone Number

Supervising Instructor's Email

The Major(s) and Minor(s) of the Pre-student/Student Teacher are:

Major(s):

Minor(s):

Is the College/University approving the applicant to PRE-STUDENT teaching: __ YES __ NO
If YES, please indicate requested grade-level or content area placement:

Is the College/University approving the applicant to STUDENT teaching: __ YES __ NO
If YES, please indicate requested grade-level or content area placement:

Please indicate the College/University's requirement for Pre-student/Student Teaching:

Supervising Instructor's Signature

Date

Guaranteed Learning for All Students!

TO BE COMPLETED BY THE SUPERINTENDENT FOR RICHMOND COMMUNITY SCHOOLS

Pre-student/Student Teacher Application is complete. __ YES __ NO

Note: _____

A copy of Pre-student/Student Teacher's Driver's License is attached. __ YES __ NO

Note: _____

A copy of the ICHAT is attached and approved. __ YES __ NO

Note: _____

Approved to PRE-STUDENT teach in Richmond Community Schools: __ YES __ NO

Assigned Cooperating Teacher: _____

Building Assignment: ES MS HS SpEd Counseling Other

Approved to STUDENT teach in Richmond Community Schools: __ YES __ NO

Assigned Cooperating Teacher: _____

Building Assignment: ES MS HS SpEd Counseling Other

After interviewing the pre-student/student teacher, he/she is accepted by:

Building/Department Administrator (Email received) __ YES __ NO

Cooperating Teacher (Email received) __ YES __ NO

ID/Copy Badge Issued: __ YES __ NO

Date issued: _____

District Email Address: _____

Superintendent's Signature

Date

Guaranteed Learning for All Students!