

Student Observation/Participation

## Department of Human Resources

312 Cedar Road Chesapeake, Virginia 23322 (757)547-0001 • Fax (757)547-0252

## FIELD-BASED EXPERIENCE REQUEST FORM

**Directions**: Please complete this form by indicating below the type of field-based experience being requested. **Use black ink and print clearly or complete electronically.** Forward the form to the Human Resources Department. Allow at least three weeks from the receipt of this form in the Human Resources Department for placement confirmation.

Student Practicum

Student Teaching/Intern

	T PLACEMENT IN		
Student's Name			
Phone			
Local Address			
(Street)	` '	(State)	` * '
College or University			
Course Title			
Professor/Instructor			
Subject Requested		Grade Level	
Dates Requested			
(Beginnin	ng)	(Ending)	
Briefly explain any special reques	sts:		
	reake Public Schools,	gree to observe all a	pplicable rules.
If you are a graduate of Chesap  I understand that CONFIDENTIAL  I will be responsible for contacting the	reake Public Schools,	gree to observe all a	pplicable rules.
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