

## **Professional Master of Education (Post Primary - DC905) Dublin City University**

## **School Placement Form**

Name of Student: Applicat	Application Number:	
Subject(s) to be taught during this placement:		
Name of School:		
Address of School:		
Name of Principal (Print):		
The school named above will accommodate above named student on their school placement according to the following criteria:		
Criteria		Please
		Tick
The student teacher is permitted to carry out a placement in the school for the entire school year		
The student teacher is permitted to teach subjects from the second level		
curriculum for approx. 4 hrs per week		
The timetable agreed will allow the student teacher to attend evening lecturers		
that start in DCU at 4pm every Tuesday and Wednesday		
The student teacher is permitted to observe teaching during the first month		
(September)		
One or more mentor teachers will be assigned to support the student teacher		
during the placement period		
The student teacher is permitted to teach the subject(s) named above		
Placement Tutors from DCU may visit the student on placement		
The student teacher will be permitted to take part in non-teaching activities and		
encouraged to become involved in the life of the school		
I agree to take the above-named student on school placement, and I agree to meet the criteria for this placement as outlined above.		
Principal's Signature: Date:		
School S		Stamp