

PIEDMONT COLLEGE

SCHOOL OF EDUCATION

Dear Educator,

Thank you for allowing our Piedmont College education student to visit and learn from you this semester. As part of the requirements for the education program, each student must complete field experiences for various college courses. Some of these experiences will include interviewing, observing, and teaching under your supervision in the classroom. A permission form is included at the end of this letter for your signature, to be returned by the student. Please keep this top portion for your records. The student should have a Piedmont photo id to present upon arrival at the school. If the student does not have his/her id, you have the right to refuse entrance to your building.

The field experiences you make possible will play a major role in each student's progress toward becoming an effective educator and in his/her continued professional development. The student will provide you copies of the assignments and specific experiences required. In addition, please call on him/her to participate in any way that you deem appropriate. The student may not be left alone at any time in the classroom. The more opportunities each student has to interact in the classroom, the better prepared and more confident each will be as a future teacher. Again, thank you for your willingness to provide guidance for our student in the field experience. If you have any questions, please feel free to call Kelly Land, Field Placement Coordinator, at 706-778-3000 ext. 1313.

Sincerely,
Dr. Kelly Land

Please return lower portion with student

School Section:

We grant permission for _____ (student) to perform his/her teacher education field experience within our school on (specific dates) _____ for (course number) _____.

Grade(s) and Subject(s) _____

School _____

Teacher Signature _____ Date _____

Student:

My signature guarantees that I have completed and passed my criminal background check (or supplied a waiver), and NO changes to the status of my background check have occurred since my original background check or waiver was documented with Piedmont College. I also understand that misrepresentation of myself, indicated by signing this form and having not completed the background check, supplied a waiver, or that changes have occurred since documentation, will be seen by Piedmont's School of Education as an ethical violation and will result in administrative action by Piedmont College.

Student Signature _____ Date _____

Mastering the art of teaching: Preparing proactive educators to improve the lives of all children