

## CASE MUSIC EDUCATION STUDENT TEACHING PLACEMENT SURVEY

Please circle your preference for the following student teacher placement considerations. Sign, date and return to the Music Education Student Teaching Coordinator no later than the end of the 4<sup>th</sup> week of the semester prior to when you desire to student teach.

**NAME** (print) \_\_\_\_\_

**LEVEL** (For state licensure, you are required to have both elementary and secondary placements.)

Lower Elementary (K-3)	Upper elementary (4-6)	No Preference
Junior High School	High School	No Preference

**SCHOOL TYPE/COOPERATING TEACHER**

Urban	Suburban	No Preference
Male Cooperating Teacher	Female Cooperating Teacher	No Preference

**TEACHING AREA(S)**

Band	Orchestra	
General Music	Vocal/Choral Music	Classroom (theory, music appreciation, etc.)

---

If you have a specific school district(s) and/or cooperating teacher(s) you are interested in being placed with, please list them.

<u>Teacher</u>	<u>School</u>	<u>Phone Number</u>	<u>Email</u>
_____	_____	_____	_____
_____	_____	_____	_____

***On the back of this form, describe your career goals? What type of position would you like to obtain following graduation?***

Signature \_\_\_\_\_

Date \_\_\_\_\_ Email Address \_\_\_\_\_