

University of Kentucky
Field Experiences and School Collaboration
104 Taylor Education Building
(859) 257-1857

FORM B
Field Placement Request

Course # & Title:

School Name	District	Cooperating Teacher and Grade Level	Teacher Candidate	Dates
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Teachers listed have been contacted and have agreed to these placements.

Instructor's Name:

Signature: _____

E-mail:

Date:

Phone:

Approved by: _____ Date: