GRAND PRAIRIE

Grand Prairie ISD Field Experiences Request Form

(To be completed by the requesting student)

Name of Student/Program Participant:	
Last 4 digits of SSN:	Date Submitted to GPISD:
Phone number:	Email:
Are you currently a GPISD Employee? If so, what position and campus/location?	
Institution/Program Associated with:	
Institution/Program Administrator Name and Title:	
Institution/Program Administrator's email address:	
Institution/Program Administrator's phone number:	
 https://www.gpisd.org/volu Return this form via email to GPISD will do its best to hon specific location 	vants must complete the Volunteer Background Check: nteer (Please select Multi Campus) o michelle.brinkman@gpisd.org or preferences but cannot guarantee a specific spot at a r.Michelle Brinkman – 972/237-5534 or rg
-Which two grade levels would you	prefer?
-Which content area would you prefer?	
-Which campus would you prefer?	

Those seeking observation hours:

-What is your anticipated finish date?

-What is your ideal start date?

-How many hours will you be completing?

Those seeking student teaching experience:

-What certification area(s) are you working toward?

Grand Prairie ISD Field Experiences Request Form

(To be completed by the requesting student)

-What should this experience look like in order to meet the requirements of your program? (Ex: Fall – 8 hours observation in 1 st grade; 8 hours observation in 3 rd grade. Spi Updated Sept 2022 of student teaching in one classroom K-3).	
All:	
-Is there anything else you would like us to know as we consider your placement?	
 Thank you for completing this form. To complete the placement process, please be sure to: Complete the GPISD Volunteer Background Check: https://www.gpisd.org/volunteer (Please select Multi Campus) Email this completed form to michelle.brinkman@gpisd.org 	
GPISD HUMAN CAPITAL OFFICE: Background Check Cleared (Date:) Placement email sent. (Date:) Other notes:	