

OFFICE OF THE ASSISTANT SUPERINTENDENT

Curriculum, Instruction & Professional Development Pamela Seki 1515 Hughes Way Long Beach, CA 90810 * 562.997.8025

CONTACT

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PLEASE COMPLETE THE FOLLOWING STEPS:

- Please complete the attached application:
 Teacher Candidate Field Work/SERVE Application
- 2. Obtain a TB testing from your health care provider. TB verification must include the date given, the date read, and the results of the testing and the name of the medical facility. If your TB test will expire within 2 months from the day you submit your application you will need to acquire a new TB testing. TB tests are due every 4 years.
- 3. Make an appointment with our Fingerprint Department in Human Resource Services by going to https://lbusdfingerprint.youcanbook.me. You can also call 562.997.8216 Identify yourself as a student observer from CSULB.
- 4. Bring to your Fingerprint Appointment your completed application, a copy of a photo ID, and a copy of the TB results. Missing information will delay processing of your application.
- 5. District staff will process application, clearing Student Observers for TB test results and Megan's Law.
- **6.** Students will be contacted by OCIPD by email or phone and given their assignment.
- 7. All student observers should check in with the front office before going to the classroom,



CSULB



College of Education Teacher Candidate Field Work/SERVE Application Placement for Fall 2017/Spring 2018

Contact Information (PLEASE TYPE OR PRINT LEGIBLY IN INK)

Name		Student ID #		
Last	First	M. I.		
Address	Apt.			
Street	Apt.	City	Zip Code	
Phone #		Date of Birth		
Preferred E-mail _			_	
Are you currently,	or have you been emplo	yed by LBUSD within the last	6 months? Yes 🛭 No 🗖	
Please enter the o	date of the last time empl	loyed in LBUSD if there has b	een a break in service	
•	ave you ever, been a Vol	•	k with the LBUSD? Yes ☑ No☑ Yea	
Health Record				
Have you ever ha	d Tuberculosis? (Not TB	B Test) Yes □ No □ If "ye	s", when?	
		ts taken within the last three ok Assessment Questionnai	e years; copies will not be returned. re.	
	•	nt work with or without accomi	modation? Yes No	
In case of an eme	rgency, please notify:		Phone #	
Current Clinical	Field Work Status: ched	ck box and circle enrolled c	asses for current semester	
□ SERVE	EDEL 200, EDEL 300			
☐ Clinical I	EDEL 100, EDEL 380, ED	DEL 413, EDEL 431, EDSS 300,	EDSP 303, EDSP 350, EDSP 355A,	
EDSP 355B, E	EDP 405, EDSP 454 and S	subject Matter observations		
☐ Clinical II	EDEL 442,EDEL 452, ED	DEL 462, EDEL 472, EDSE 435,	EDSE 436, SCED 475, EDSE 457,L	
		564, EDP 560, EDSP 577, EDS		
	- Student Teaching	•		

Continued on Reverse

EXPLANATION OF CONVICTION(S)

Have you, as a juvenile or adult, ever been convicted, fined, imprisoned, placed on probation or

sentenced in any civil, criminal, or military court, or have you ever forfeited bail? Yes No						
Are you currently	pending arrests? Yes ☐ on probation? Yes ☐ our probation end?					
You must include r and convictions d whether a convicti	ES to any of the above question in traffic violations (if they ismissed following probation must be disclosed. <i>Fail misunderstanding of the land and the land trail is to be appropriately and the land trail in the land trail is to be appropriately and the land trail in the land trail is to be appropriately and the land tra</i>	/ resulted in the issuar n. You are solely res <i>ure to report a conv</i>	ice of a warrant), drunk consible for making th iction otherwise repo	driving convictions ne determination of ortable will not be		
of offense; explain	a below to list the offense(s) in detail the date the offense mentation as necessary.					
Penal Code #	Type of Offense	Date Occurred	Place Occurred	Sentence or Fine		
will be done in orde	formation contained on this of er to ensure that I am a suital Should any false or derogato the LBUSD.	ble candidate to be a ve	olunteer for the Long Be	each Unified School		
as to my previous full disclosure of ar	an application for the position record and character determing and all information that you be to a duly authorized agent	ining my qualifications u may have concerning	and suitability, I author	rize the release and		
The badge is the phome nor loan it to	it is district policy for me to voroperty of LBUSD, and it slop others. I agree to sign in an artion about students' acade	hould be kept on site a nd out each time I am o	at all times. I agree to on campus as a volunte	not take the badge eer. I agree to keep		
Applicant Printed	Legal Name					
Applicant Legal Si	gnature		Date			
•••••	FOR LB	USD OFFICE USE ON	I <u>LY:</u>	•••••		
TB Date:	Fingerprint Clearan	ce: R	eviewed by (District Off	fice):		
Date Placed: Location:						