



## Admissions to Job-Embedded Observation Application

**Please TYPE on this document.**

**Deadline: March 30 (Fall) or October 30 (Spring)**

This form is to serve as a declaration of my request **Job-Embedded Observation** during the \_\_\_\_\_ Semester of 20\_\_\_\_ to complete required four (4) TEAMS evaluations. I understand that I must have registered, taken, and received scores for the Praxis II Content Knowledge Exam that pertains to my area of sought licensure **and** enroll in EDCI 5620 – Alternative Licensure II.

**Job-Embedded Expiration Date** (*as stated in TNCompass*):

**Endorsement Area:**

**TN Compass #**

\_\_\_\_\_  
**Student's Name (Print)**

\_\_\_\_\_  
**T #**

\_\_\_\_\_  
**Phone #**

\_\_\_\_\_  
**Email Address**

<b>School Name</b>	<b>School District</b>	<b>School Address</b>
<b>School Administrator</b>	<b>Administrator Email Address</b>	<b>School Phone Number</b>
<b>Grade Level (s)</b>	<b>Years at School Site</b>	<b>School Website</b>

☐ Completed Program of Study, *verification that this is your final semester of coursework.*

☐ [Two \(2\) Disposition Assessment Form](#)

➤ #1 Disposition [School Administrator] \_\_\_\_\_

➤ #2 Disposition [University Faculty] \_\_\_\_\_

**\*Please return this document to the Office of Teacher Education and Student Services.  
Clay Hall, 112 or via email at [teachercertification@tnstate.edu](mailto:teachercertification@tnstate.edu)**

<b>TESS Office Only</b>	<b>Date Received</b> _____	<b>By</b> _____
Application for Job-Embedded (Semester/Date): _____		
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Reason for Denial: