Student Name _____ Student ID # _____

UNIVERSITY of West Georgia

Supervising Teacher Information Form

Directions: Please provide your information on this form. You must complete this entire form and return it to the UWG supervisor in order to receive your stipend (only internship supervisors receive a stipend). We request demographic information about you and your school to fulfill requirements of our accrediting board. Thank you for your cooperation.

Please print your last name and first name.

LAST NAME	FIRST NAME	SOCIAL SECURITY NO.
Please print legibly.	Please print legibly.	You MUST provide your SSN to receive the stipend.

YOUR RACE

- ○ African-American
- ○ Asian
- ○ Caucasian
- ○ Hispanic
- ○ Multi-racial
- ○ Other

HIGHEST DEGREE YOU HOLD

MARK ONLY ONE DEGREE

- ○ Doctorate
- ○ Specialists (Ed.S.)
- ○ Masters
- ○ Bachelors

YOUR SCHOOL SYSTEM

○ Bremen City	○ Douglas County	○ Heard County
○ Carroll County	○ Fayette County	○ Paulding County
○ Carrollton City	○ Floyd County	○ Rome City
○ Coweta County	○ Haralson County	○ Whitfield County

○ Other _____

If "other," please write the name of your system

CURRENT CLEAR AND RENEWABLE CERTIFICATES HELD

You can access your certification information at http://www.gapsc.com/TeacherCertification.asp

NAME OF CERTIFICATION	YEAR RECEIVED
Example T-4 Early Childhood	1992

If you hold a current Teacher Support Specialist Endorsement (TSS), you must include it above.

YOUR EDUCATIONAL BACKGROUND (list each degree)

DEGREE	INSTITUTION	MAJOR
Example Ed.S.	UWG	Early Childhood

YOUR EMPLOYMENT EXPERIENCE (most recent first)

DATES	SCHOOL & SYSTEM	ASSIGNMENT
Example 2001-Present	Kennesaw Elementary, Cobb County GA	Third grade teacher

Thank you for completing this form. Please sign

_____

Signature