

Application for a Rural Professional Placement

This form is to be completed by those students **residing in metropolitan Melbourne** who would like to undertake a teaching/professional placement in a **rural school**.

Before completing this application students are encouraged to consult the information on the DEECD Student Teacher Practicum Scheme, as they may be eligible to apply and receive funding under this scheme for completing placement in a rural area: <http://www.education.monash.edu.au/placements/student-teacher-practicum-scheme.html>

All applications will be considered on a case by case basis by the Course Advisor and should be made at **the beginning of each academic year**, or where applicable – **at least 6 weeks prior to commencement of the placement**. All applicants will be advised via their Monash University student email as to their application outcome.

Title: _____ Surname: _____ First Name: _____

Monash Student ID: _____ Monash Student email: _____

Contact Telephone Number: Home _____ Mobile _____

Course: Early Childhood Primary Secondary

Campus: Clayton Gippsland Peninsula

Secondary Students Only: Specialism 1: _____

Specialism 2: _____

Proposed Semester of Rural Placement

Semester 1 2010 Semester 2 2010 Semester 1 2011 Semester 2 2011

Relevant Placement Unit: Code _____ Name _____

Proposed School Details

Please list below the School names or rural areas you would like to be placed. The Faculty already has a number of established relationships with schools in rural areas, please view <http://www.education.monash.edu.au/placements/rural-interstate-overseas.html> for a list of these schools.

School Name/Rural Area: 1) _____

2) _____

3) _____

4) _____

Why are you interested in completing a rural placement?

Please return this application to:

Professional Placements Office, Faculty of Education, Monash University PO Box 527 Frankston VIC 3199

Fax: 9904 4409

Email: professional.placements@education.monash.edu.au

COURSE ADVISOR USE ONLY

Application Approved: Yes No (if no please provide a reason so the PPO may inform the student)

Comments:

Name:

Signature:

Date:

PPO USE ONLY

Date Student Notified:

Unit Leader Advised: 1) Name

Date

Unit Leader Advised: 2) Name

Date

Confirmed Placement Dates: From

To

PPO Staff Member:

Signature:

Date:

NB: copy of correspondence to student advising of the application outcome must be filed with the original student application & Course Advisor decision.