Job Embedded Program *Intent to Hire*



Student Last Name	First	: Name	Middle Name		Maiden Name	
Street/P.O. Box	City		State		Zip Code	
Cell Phone	ETSU	J Email Address	School District Email Address		l Address	
School System		Name of Director of Schools		Start Date		
Contact Person/Principal		Contact Person Phone Number		Contact Person Email		
Name of School		Address		School Phone Number		
Mentor Teacher Name		Mentor Teacher License Number		Mentor Subject and Grade Taught		
Mentor Teacher Email		Mentor Teacher Phone Number				
		This Section For Officia	al Use Only			
Student Has an ETSU Clear Background CheckYesNo Date Completed:		Background Check Included each of these areas: TBI Criminal History TBI Fingerprint Search Tennessee Sexual Offender Search FBI Fingerprint Search		of Sign Ched	ature of Person who Verified ck:	
Area for Licensure:Elementary Education	on (K-5	FBI Name Based)Middle Grades 6-8	Scho	ool Counse	eling (PreK-12)	
SPED K-12Secondary (
This letter is evidence of intent to employ the						
Job-Embedded Student will teach subject:Employee/Student Signature:						
		Date:				
ETSU Dept. Chair/Program Coordinator:						
FTSU Director of Field Experience & Residency			Date:			