

# NORTHEAST EDUCATIONAL SERVICES COOPERATIVE

## APPLICATION FOR OBSERVATION EXPERIENCE

<b>P E R S O N A L</b>	Last Name	First Name	Middle Name	Date
	Street Address			Primary Phone Number
	City, State, Zip Code			Additional Phone Number
	What field experience are you seeking?			E-mail Address

### ADMINISTRATIVE RECOMMENDATION

The individual named above is a student in good standing in our school district, recommended for an  Yes  
observation experience.  No

Administrator's Signature

Date

### CONFIDENTIALITY

During the course of an observation experience, you may become aware of confidential information about specific students, including such information as students' academic performance, behavior, health, disabilities, and other related matters. This information is private and protected by law.

Do you understand and agree that you will not disclose such confidential information, except to  Yes  
educational employees who have a need to know?  No

### CRIMINAL BACKGROUND CHECK

Have you ever been arrested and / or convicted of any crime, other than minor traffic offenses?  Yes  
(If yes, explain in detail on a separate sheet of paper.)  No

Applicant's Signature

Date