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**PRACTICUM ADVISOR PROFILE FORM**

Date: First Name: Surname:

Address: City/Town:

Postal Code: Email: Fax:

Home Phone: Cell Phone: Alternate Phone:

Indicate the School Division in which you live:

## Please indicate your intentions for the upcoming year:

I wish to work as a Practicum Advisor I am not returning I am taking a Leave of Absence

## The following information is collected to determine your areas of expertise, experience, and preferences so when assignments are made, they can be taken into consideration.

1. I would prefer to be assigned to the following program (*If you are interested in more than one, PLEASE NUMBER them in order of preference*):

|  |  |
| --- | --- |
|  Early Years |  |

  Middle Years

 Senior Years

1. I would prefer to be assigned about (*indicate #*) teacher candidates.
2. I would prefer to be assigned to the following school(s):

I have no preference which schools I am assigned.

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1. I can work in Rural Manitoba, specifically, the following town/communities:
2. Languages of instruction in which I could comfortably supervise a teacher candidate (*Check all that apply*): English French Spanish Japanese Mandarin German Ukrainian Hebrew

ASL (American Sign Lang.) Aboriginal (*specify*): Other (*specify*):

1. I am a specialist in: Phys. Ed

Music (*specify*): Early/Middle Years Senior Choral Senior Instrumental

1. Other relevant information, special requests, etc.

Return by:

email: practicum.education@umanitoba.ca

mail: University of Manitoba
Faculty of Education

Practicum & Partnerships Office

Room 215, Education Building
 Winnipeg MB R3T 2N2

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