



Friendswood
Independent School District

302 Laurel Drive
Friendswood, Texas 77546
myfisd.com
lfoley@fisd12.net

To: Clinical Teaching Candidates

If you are requesting placement as a **Clinical Teacher** for your alternative certification program or college/university degree, please read the following requirements and complete the **Clinical Teaching Packet**. If approved, you will be notified.

PROCEDURE FOR CLINICAL TEACHING CANDIDATES:

1. Potential candidates should fill out the Clinical Teaching Packet located on the Human Resources page of the FISD website at myfisd.com.
2. The packet needs to be returned to Hope Coburn in Human Resources by email at hcoburn@fisd12.net or may be delivered to 302 Laurel Drive, Friendswood, TX 77546.
3. Human Resources will make contact with the candidate or university regarding personal data the district needs to collect before clinical teaching can be assigned in Friendswood ISD.
4. Human Resources will run a criminal history background check. If clear, the candidate will proceed.
5. Candidates **MUST** get fingerprinted **BEFORE** they can begin clinical teaching in FISD. so that FISD can subscribe to their fingerprints via SBEC and DPS database. This is a personal cost the clinical teacher will incur. Fingerprinting runs approximately \$50.00. Please note: FISD will contact you regarding this process. **DO NOT** self-initiate your fingerprinting, this will require you to be fingerprinted twice and increase your fees.
6. Human Resources will coordinate placement with the appropriate Assistant Superintendent.
7. Human Resources will notify candidate and university supervisor of assignment, including contact information of supervising teacher, principal and Assistant Superintendent.
8. All remaining communication regarding the clinical teacher and his/her assignment will be done via the university liaison and the FISD campus. If there are issues that require district level assistance or communication, campus will alert HR.

Any questions regarding Clinical Teaching should be directed to Hilarie Gonzalez at hgonzalez1@fisd12.net or 281-996-6604.

Respectfully,

Lindsey Foley
Executive Director of Human Resources
Friendswood Independent School District
Direct Line: (281) 996-6624
Email: lfoley@fisd12.net

Field Experience and Observation Candidate

2024-2025

Friendswood ISD is authorized by state law to obtain criminal history record information on individuals who intend to serve as observers/volunteers for the District (Texas Education Code 22.08). The information below is necessary to obtain criminal history record information.

This information will be reviewed only by the Director of Human Resources and HR Staff. You will be contacted immediately if there is a question that might compromise the safety of our students.

The following information is required for the protection of our children and is confidential.

Name (Please print):

<i>Last</i>	<i>First</i>	<i>Middle</i>	<i>Maiden</i>
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<i>Address</i>	<i>City</i>	<i>State</i>	<i>Zip code</i>
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Social Security Number

Date of Birth

(____) _____

State Driver's License/State ID

Gender:

Male

Female

Ethnicity:

African American

Anglo

Hispanic

American Indian

Asian

Purpose:

of observation hours needed: _____

University: _____

Professor: _____

ACP: _____
Alternative Certification Program

Requested Campus(es):

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> Cline Elem | <input type="checkbox"/> Westwood Elem | <input type="checkbox"/> Junior High |
| <input type="checkbox"/> Windsong Int | <input type="checkbox"/> Bales Int | <input type="checkbox"/> High School |
| <input type="checkbox"/> Special Ed/Services | | |

Grade/Subject: _____

***Please be sure to specify a subject!**

I understand the importance of confidentiality and agree to keep any names and/or student information strictly private and confidential. I understand that the information I am providing about age, sex, and ethnicity will not be used to determine eligibility for participation, but will be used **solely for the purpose** of obtaining criminal history record information for involvement as an observer.

Signature: _____ Date: _____

Cell phone: _____ Email: _____

**Submit completed forms to: FISD Human Resources Department:
ATTN: Hilarie Gonzalez, hgonzalez1@fisdk12.net or 302 Laurel Dr., Friendswood TX 77546**