

# PLACEMENT CONTACT DETAILS FORM

**Prompt return required**

Please take this form to the school / site on the first placement day to record the Supervising Teacher's contact details. Email a copy of the completed form to the Professional Experience Office at [edupo@cqu.edu.au](mailto:edupo@cqu.edu.au)

Student Details					
<b>Name:</b>					
<b>Course Code:</b>					
CC12 – B.Ed. (Primary)	CC14 – B.Ed. (Early Childhood)	CC45 – (MTeach Primary)			
<b>Placement:</b>					
B.Ed.:	PP1	PP2	PP3	PP4	PP5
MTeach:	Praxis 1	Praxis 2	Praxis 3	Praxis 4	
Site Details					
School/Placement Site Name:					
Year Level:					
Supervising Teacher Details					
Supervising Teacher #1 <b>** Please print carefully or type **</b>					
Name:			Email:		
Supervising Teacher #2 <i>(Only if applicable)</i> <b>** Please print carefully or type **</b>					
Name:			Email:		

**It is important that this form is returned as a matter of priority...**

- ✓ To ensure supply of your placement materials and reporting documents to your Supervising Teacher
- ✓ To provide your CQUniversity Supervisor direct contact details for your Supervising Teacher
- ✓ To ensure your Supervising Teacher is paid for the role they are performing