Applicant
________________________________________________________________________________
Applicant School Site
________________________________________________________________________________
Complete Site Address
________________________________________________________________________________
District Name
________________________________________________________________________________
Name of Mentor  ________________________________ Mentor Work Location ____________________________________
Mentor Work Phone:    _______________________________ Work E-mail Address:  _____________________________________

Saint Leo University courses are a blend of theory, current research, and practice. Every course will have practice oriented activities which require the student to consult with the school leadership team. Two courses are almost exclusively applied practice. EDU 661 Managing the Leadership Environment has 120 hours of applied field experience. EDU 678 Educational Leadership Practicum requires 150 hours of applied field experience which require students to produce a School Improvement Project which includes the school curriculum and instructional practices, student achievement, and school/community relations. The workplan and activities for these three courses must be performed on a school site, under the supervision of a school principal or qualified administrative designee.

Mentors must be certified principals or assistant principals in Florida and meet requirements of effective leaders as per F.S.1001.02 and 1012.56(1). I acknowledge that I possess the required educational leadership and/or principal certification issued by the Florida Department of Education.

In EDU 661, three phone conferences between the mentor and University Supervisor are required (beginning, middle and end of the term). The leadership candidate is involved in the midterm and final conference. In EDU 678, two meetings (face to face) are required of the mentor and University Supervisor. The University Supervisor will come to the school for these meetings.

By my signature, I agree to serve as “Mentor” for the above named candidate; to assist the student in the selection of appropriate leadership/administrative activities; to help the student gain access to meetings of groups such as the school board, district administrators, district and school committees, and other appropriate bodies; and to supervise field activities as delineated in the student’s project and activities work plan for application courses and his or her practicum course. I also agree to evaluate the student’s performance for on-site and in-course projects, activities, and work plans; and to provide evaluative information to the university instructor.

Signatures Required:

Mentor:  Print Name: ___________________________ Signature: _________________________________
Date: ______________

District Official: I certify that the above named principal or assistant principal is highly qualified and meets the requirements of effective leaders as per F.S.1001.02 and 1012.56(1).

Print Name/Title: ___________________________ Phone number :: (____)________________
Signature: _________________________________ Date: _________________________________
Saint Leo University
Graduate Educational Leadership Fieldwork/Practicum
Supervising Mentor Agreement Form

(PLEASE PRINT)

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Complete Site Address
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District Name
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Name of Mentor ________________________________ Mentor Work Location ____________________________________
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Mentors must be certified principals or assistant principals and meet state requirements of effective leaders. Mentors must acknowledge that they possess the required educational leadership and/or principal certification issued by their State Department of Education.

In EDU 661, three phone conferences between the mentor and University Supervisor are required (beginning, middle and end of the term). The leadership candidate is involved in the midterm and final conference. In EDU 678, two meetings are required of the mentor and University Supervisor. The University Supervisor will make arrangements for these meetings.

By my signature, I agree to serve as “Mentor” for the above named candidate; to assist the student in the selection of appropriate leadership/administrative activities; to help the student gain access to meetings of groups such as the school board, district administrators, district and school committees, and other appropriate bodies; and to supervise field activities as delineated in the student’s project and activities work plan for application courses and his or her practicum course. I also agree to evaluate the student’s performance for on-site and in-course projects, activities, and work plans; and to provide evaluative information to the university instructor.

Signatures Required:

Mentor: Print Name: ___________________________ Signature: _________________________________
Date: ______________

District Official:  I certify that the above named principal or assistant principal is highly qualified and meets the requirements of effective leaders as defined.

Print Name/Title: _______________________________ Phone number: (____)________________
Signature: ____________________________________ Date:_____________________________