Interns/Observers

Students interested in completing observation hours need to complete the following:

- Volunteer application to process a [Volunteer Application](#)
- Contact Principal and Campus Instructional Specialist to request observations
- Complete Observation Hour Request Form (page 2) print and submit to campus
- Complete KISD’s Observation Guidelines Form (page 3) print and submit to campus
- Observations are not scheduled during the summer months
- Request must be submitted to campus two weeks prior to start of observations

Thank you for considering Killeen ISD!
### Observation Hour Request Form

**Name:** ___________________________  **Date:** ___________________________

**Certification Area:** __________________________________________  
**Graduation Date:** __________________________________________

**Phone:** ___________________________  **Personal Email:** ___________________________

**Name of University/ACP Program:** __________________________________________

**Supervisor’s Name:** ___________________________  **Phone:** ___________________________

I completed and submitted a volunteer application on: ___________________________

**Observation Request:**

I am required to observe _____ hours in the classroom.

I am requesting to complete _____ hours of observations in Killeen ISD.

I am requesting to observe the following hours at each of the below grade levels:

- **Elementary School (Prek-5)**
- **Middle School (6-8)**  **Subject:** ___________________________
- **High School (6-8)**  **Subject:** ___________________________

I plan to complete my hours of observation on **M, T, W, Th, F** between the hours of ___________________________

-----PLEASE REVIEW BUT DO NOT WRITE BELOW THIS LINE-----

This section will be completed by a school principal or designee. Please contact the teacher(s) below to schedule the best time for observation.

You are approved to observe at ___________________________

<table>
<thead>
<tr>
<th>Teacher’s Name</th>
<th>Subject</th>
<th>Grade Level</th>
<th>Room #</th>
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**Teacher’s Contact Information:** ___________________________  **Conference Period:** ___________________________

**Comments:** (Best observation times)

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If you have any questions about this assignment(s) please contact ___________________________ at ___________________________. You are expected to follow Killeen ISD’s guidelines for observations. Provide your campus(es) with a signed copy of KISD’s Observation Guidelines. Thank you for considering Killeen ISD.
Observation Guidelines

Be respectful of the campus’ ultimate purpose, educating the students that attend the campus and serving the needs of those families.

Respect the campus decision of classroom and teacher observation placement.

All cell phone use for any purpose during observation is prohibited; **no pictures are allowed.**

Professional dress is required for all observers. Admittance to campus may be denied if attire is deemed inappropriate by an administrator.

Remember all information concerning students is confidential.

You may not observe in your child’s classroom.

Be courteous and professional to the faculty and staff assisting you in completing your observations.

Human Resources and/or the campus administrator have the authority to deny or discontinue requests for observations.

I, ___________________________ understand that I must comply with the Observation Guidelines above and with rules and regulations established by the campus where I have been accepted to observe.

Observer’s Signature                      Date

*Provide the Principal and/or Campus Instructional Specialist with a signed copy of KISD’s Observation Guidelines.*