



TARLETON
STATE UNIVERSITY
Member of The Texas A&M University System

Clinical Teacher Contact Sheet

Clinical Teacher Name: _____

Tarleton Student Email: _____

Best Contact Number: _____

District Placement: _____

School Placement: _____

School Phone Number: _____

School Internet Access Code: _____

Subject/Grade Level: _____

Cooperating Teacher: _____

Cooperating Teacher's Conference Time: _____

Cooperating Teacher's Email: _____

Cooperating Teacher's Phone#: _____

Administrator: _____

Administrator's Email: _____

Revised 8-4-2020

EDUCATOR PREPARATION SERVICES

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