

DOMINICAN UNIVERSITY *of* CALIFORNIA

SUPPORT/MENTOR TEACHER – UNIT REQUEST FORM

To receive units, form must be submitted during the semester of the student teaching experience

Please Indicate Which Program:

___ Single Subject - 1 Period ___ or 2 or more Periods ___
(1.5 units) (3 units)

___ Multiple Subject - 7 Week Placement ___ OR Site Based Supervisor ___
(1.5 units) (3 units)

___ Special Education - 7 Week Placement ___
(1.5 units)

of units earned: ___

Today's Date: _____

Full Name: _____

Address (inc. City & Zip) _____

Telephone: _____ Email: _____

Have you taken courses from Dominican University of California before? (What/When):

Please list any other name(s) you've been registered under: _____

Information Regarding Your Supervising Session

School Site & City: _____

Student Teacher Supervised: _____

Session You Supervised: _____ (i.e., Spring 2026)

Please return to:

Pauline Camp

Dept. of Education

Dominican University of California

50 Acacia Avenue, San Rafael, CA 94901

or

Pauline.camp@dominican.edu