

**Teacher Support and Coaching Endorsement Program  
ADMINISTRATOR'S RECOMMENDATION FORM  
Georgia Southern University**

I understand that my school administrator and I must collaborate to ensure that a teacher to coach or a student teacher to supervise will be assigned to me for the upcoming fall semester. Failure to do so will result in my being unable to complete the Teacher Support and Coaching Endorsement program at Georgia Southern University as I would not be able to take the required *ESED 8232: Internship for Teacher Support* course in the fall.

\_\_\_\_\_  
Teacher Support Coaching Candidate

\_\_\_\_\_  
Candidate's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Candidate's Position

\_\_\_\_\_  
School and District Name

**As school principal/assistant principal,** I understand the above-listed educator is participating in the Georgia Southern University Teacher Support and Coaching Endorsement Program. As such they will spend several hours each week in the role of Teacher Support and Coach. I commit to identifying a current (or incoming) teacher at our school for the candidate to support/coach or a student-teacher to supervise this upcoming fall semester:

\_\_\_\_\_  
Administrator's Name

\_\_\_\_\_  
Administrator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator's Position