

Cooperating Teacher Stipend Forms

The attached 2 forms must be completed in order to expedite stipend payments.

1. Please complete the attached forms:

- a. Cooperating Teacher Agreement
- b. W-9

2. When completing the Cooperating Teacher Agreement, please fill it out in its entirety, being sure to check off the appropriate stipend box.

- a. If a student is with you for 2 semesters (full academic school year), please check off the first line for \$400.00.
- b. If a student is only with you for 1 semester, please check off the second line for \$200.00.
- c. If there are 2 teachers and the student is with you for 2 semesters (full academic school year), please check off the third line for \$200.00.

3. When completing the W-9, please be sure to fill out the following sections:

- a. Name (line 1) *Note: Business Name (line 2) may be left blank*
- b. Line 3 (check for Individual)
- c. Address, City, State, and Zip Code (lines 5 - 6)
- d. Part I - Social Security Number
- e. Part II - Signature and Date
 - i. Please use either an official electronic signature, or your signature in pen. A typed signature cannot be accepted.

4. When both forms are completed, please email them to jengler@ramapo.edu or mail to the following address:

Dr. Jordana Pestrong Engler
Teacher Education Program
505 Ramapo Valley Road
Room E-219
Mahwah, NJ 07430

If you ever have questions on any of these forms, please feel free to reach out to Dr. Pestrong-Enger at jengler@ramapo.edu

Cooperating Teacher Agreement

Name of Cooperating Teacher _____

Home Address (check will be mailed here) _____

Cell Phone _____ **Work Email Address** _____

Name and Address of School _____

Grade Level/Subject Area _____

Name of Clinical Intern _____

Semester(s) and Year of Placement _____

I agree to serve as a Cooperating Teacher in the location and for the dates as listed above

Legal Signature

Date

The person named above is serving as a Cooperating Teacher in the Teacher Education Program at Ramapo College for the time indicated above.

_____ **\$400.00 (1 teacher, 2 semesters)**

_____ **\$200.00 (1 teacher, 1 semester)**

_____ **\$200.00 (2 teachers, 2 semesters)**

Please return this form to Dr. Jordana Pestrong-Engler at jengler@ramapo.edu

Or mail to Dr. Pestrong-Engler

Teacher Education Program

505 Ramapo Valley Road

Mahwah, NJ 07430