ELEMENTARY EDUCATION PK-6 SEMESTER LONG INTERNSHIP APPLICATION CHECKLIST

Last Name__________________________ First Name__________________________

G#____________________________________

BEFORE TURNING IN YOUR APPLICATION:

TESTING AND TRAINING REQUIREMENTS: NOTE: All official and passing test scores must be submitted and in the Mason system (i.e. Banner/PatriotWeb) by the application deadline. By checking the box, you are confirming that you have met the requirement:

☐ I have passed the VCLA
☐ I have passed the Praxis Core Academic Skills for Educators Tests (Effective 01/01/14)
☐ I have passed the Praxis II.
☐ I have passed RVE.
☐ Please submit your applicable First Aid/CPR/AED training/certification documentation with G-Number noted (visit http://cehd.gmu.edu/teacher/emergency-first-aid for criteria and steps) to internsh@gmu.edu or in person to Thompson Hall, Suite 1700.

APPLICATION WILL INCLUDE:

☐ Complete the ONLINE internship application at the following address: http://cehd.gmu.edu/internship-application
   This online application must be completed before you submit your paper application to the Clinical Practice Specialist.

☐ Unofficial Mason transcript

☐ A Goals Statement Two pages typed.

☐ Print out completed endorsement review page (note, if your endorsements are complete you will have a completion date in the completion window)

☐ Negative PPD/Skin TB test results (This test must be dated within 12 months of the internship start date.)

☐ Current resume

☐ One (1) complete COLLATED application Deliver to Comfort Uanserume, the Clinical Practice Specialist (Thompson 1708), by the deadline.

PLEASE NOTE THE DEADLINE:

☐ Spring Applications—September 15

NOTE: Any application turned in past the deadline WILL NOT BE ACCEPTED. If you withdraw from your internship, a new application and supporting documents are required by the applicable semester deadline.

AFTER TURNING IN YOUR APPLICATION

☐ Register for EDCI 790. Register for 6 credits on Patriot Web for Spring.

☐ Retain a copy of this application and supporting documents for your records

I certify that I have included the items checked on this list. ________________________________ Signature
Application for Student Teaching Internships

Semester: Spring   Year: _________

Name: ________________________________  Student G # __________

Last       First       Middle Initial

Current Address: ________________________________  GMU E-Mail Address

Street       City       State       Zip

Current Phone: Day ___________________________   Evening ___________________________

For the jurisdictions where you request placement, list schools you attended, any school in which immediate family members are employed, or where you have children attending.

Licensure: Elementary Education Pk-6

I certify that I have completed all endorsement requirements and pre-requisites and will conduct myself in a professional manner at all times during my internship. I understand that due to issues related to placement availability, my internship preference may not be accommodated. Should I withdraw or defer my application, I am also responsible for all fees incurred and for alerting my University Supervisor, Program Advisor and the Clinical Practice Specialist via a written request.

Student: ________________________________

(Signature Required)

Language(s) spoken in addition to English: __________________________________________

Please note: All local school systems require students to complete a criminal background check through their human resources office (not through George Mason University) prior to beginning the internship. Detailed instructions on the process will be sent to the student from either the school system or Mason. Students are strongly advised to disclose any/all legal incidents that may appear on their records. The consequence of failing to do so, whether or not such incidents resulted in conviction, is termination of the internship.