EARLY CHILDHOOD EDUCATION PK3 and EARLY CHILDHOOD SPECIAL EDUCATION ON-THE-JOB INTERNSHIP APPLICATION
George Mason University
College of Education and Human Development

This application is to be completed by students using current employment as an internship placement. Students requesting placement should NOT complete this application; the application for placement can be found at http://cehd.gmu.edu/teacher/internships-field-experience.

CEHD’s priority is that all candidates receive adequate support and supervision. Periodic visits from a university supervisor cannot fill the gap created by the absence of daily modeling and/or feedback from a qualified mentor. The purpose of this contract is to ensure that you are getting the support you need as a candidate from your mentor teacher, supervisor, and school officials.

The Early Childhood Education Program determines on-the-job placements on a case-by-case basis. This is because the Commonwealth of Virginia has specific requirements that specify who is permitted to serve as a mentor teacher. This is also because there are site restrictions related to accreditation and school district regulations that define field and internship parameters. On-the-job internships are intended for provisionally licensed teachers who are serving as the lead teacher in an approved early childhood education context.

In the past, the Early Childhood Education program has permitted students serving as instructional assistants to complete one of the two three-credit internships on the job. In order for an instructional assistant to pursue this option, the principal and the lead teacher need to officially grant permission for the instructional assistant to fulfill all of the requirements for the internship course, which includes assuming all teaching responsibilities for an extended period of time, while the lead teacher assumes the role of instructional assistant. The student would then need to complete a second internship in the required teaching context not fulfilled by the on-the-job placement.

APPROVED ON-THE-JOB (OTJ) APPLICATIONS MUST MEET THE FOLLOWING CONDITIONS:

- The candidate must be supported daily by a mentor teacher or other supervisor who holds a Virginia teaching license in the candidates’ licensure area and who has at least 3 years of teaching experience. This person must be located in the candidate’s school building. To determine an appropriate Mentor Teacher for internship, the candidate or principal may choose a mentor teacher who is employed in the school.

- The position must be full time and must be in the area for which licensure is sought.

- The position must provide the candidate with experiences at the ages and/or grade levels in the specific licensure area sought.

- The candidate must complete the full period of internship prescribed for the state-approved program.

- If the candidate currently holds a position other than as a full-time teacher (i.e., instructional assistant or health awareness aide), then the candidate’s employer must approve the change in the candidate’s employment status to fulfill the OTJ requirement. Electing to complete an on-
the-job internship in a position other than as a full-time teacher requires the completion of a second internship within the alternate placement area defined by the candidate’s graduate certificate.

- If the conditions for an approved on-the-job internship are not met, and the candidate accepts a full-time teaching position before completing a state-approved program, the student must seek licensure through their employers in accordance with state regulations for a provisional licensure.

Candidates should contact Kayla Turner (kturne4@gmu.edu) prior to completing the on-the-job application to ensure their position qualifies. Please keep in mind the traditional internship application deadlines and procedures and plan accordingly.

Candidate contact information is requested here solely for the purpose of facilitating your internship placement. By submitting this application, you affirmatively acknowledge that your contact information (name, phone number, email, and/or address) will be shared with school personnel for facilitating such placements and communications regarding those placements.

**STEPS FOR APPLYING**

*Check the appropriate deadline for your application. You should begin preparing your materials several weeks in advance of your intended deadline.*

- Spring On-the-Job Applications—Due to Clinical Practice Specialist by November 1
- Fall On-the-Job Applications—Due to Clinical Practice Specialist by May 1

**NOTE:** Any application turned in past the deadline WILL NOT BE ACCEPTED.

- STEP 1: Provide official passing scores for all applicable testing. All official test scores must be submitted and in the Mason system (i.e. Banner/PatriotWeb) by the application deadline. Reporting information can be found at [https://cehd.gmu.edu/teacher/test/](https://cehd.gmu.edu/teacher/test/).

If there is an issue regarding test completion for your application, you must contact internsh@gmu.edu prior to the internship application deadline.

- STEP 2: Add on the secondary licensure graduate certificate. You must be enrolled in the Early Childhood Education PK3 (EPK3), the Early Childhood Special Education (ECSE), or the Dual Licensure EPK3 and ECSE Graduate Certificate to apply for an internship.

- STEP 3: Complete internship application packet. Packet must include two copies of the following:
  - Complete the ONLINE internship application BEFORE submitting your paper application at [http://cehd.gmu.edu/internship-application](http://cehd.gmu.edu/internship-application).
  - Internship Application
☐ Unofficial Mason transcript (available at http://patriotweb.gmu.edu)

☐ Printout of Degree Evaluation from Degree Works at time of application

☐ A Two-Page, Typed Goals Statement (NOTE: Students may use an updated version of the goals statement submitted as part of their application to the program.)

☐ Current Resume

☐ Completed Endorsement Checklist (EPK3 and Dual Licensure students only)

☐ Certificate of completion of the online child abuse and neglect training

☐ Certificate of completion for the Dyslexia Module

☐ Submit your First Aid/CPR/AED 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 2300. Your certification must include a hands-on training component. We will not accept online-only training.

☐ Copy of Provisional License or Contract

All documents are required by the application deadline.

☐ STEP 4: Obtain advisor’s signature. Once your application is complete, please bring two copies of your application documents (separate envelopes help) to Thompson Hall 1200. Applications will be accepted the week prior to the deadline and all applications must be submitted in paper form to Kayla Turner, kturne4@gmu.edu, for processing. We will submit your packet to the internship office for you after we complete the review. If any elements of the internship application are missing, your application will not be submitted and this may result in missing the deadline.

Any changes in internship status must be reported to internsh@gmu.edu. If you withdraw from your internship, a new application and supporting documents are required by the following applicable semester deadline.
**APPLICANT INFORMATION:**

| Name: ______________________________________________________________________________ |
| G Number: ____________________________  Mason E-Mail __________________________________ |
| Current Address: _________________________________________________________________          |
| Current Phone: Day __________________________  Evening ____________________________ |

**PROGRAM INFORMATION:**

*Licensure Certificate Program (check one)*

___ Early Childhood Special Education (ECSE)

___ Early Childhood Pre-Kindergarten – Third Grade (EPK3)

___ Dual Licensure ECSE and EPK3

**NOTE:** The licensure certificate program should correspond with the certificate program listed on your unofficial transcript under the Current Program section. Please check your unofficial transcript to ensure you are in the appropriate program and applying for the correct internship.

*Test Scores (check one for each test):*

Praxis Core Academic Skills for Educators Tests or substitute (ACT/SAT): _____ on file

VCLA: _____ on file

Praxis Elementary Education: Multiple Subjects Test (EPK3 and Dual Licensure only): _____ on file _____ n/a

Explain reason for exemption from any of the above tests and provide documentation, such as copy of teaching license, if applicable. See advisor regarding exemptions.
ON-THE-JOB INTERNSHIP SETTING/INFORMATION (TO BE COMPLETED BY STUDENT):

District/County: _________________________________  School: ___________________________________________

Describe or attach your daily schedule.

________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

In consultation with your advisor, please confirm how many credits your on-the-job placement will fulfill.

☐ One 3-credit internship (8 weeks)

☐ One 6-credit internship (16 weeks)

I certify that the information provided in this application is accurate. My teaching responsibilities will include direct instruction, co-teaching support, and/or small group direct instruction. If my position changes, I will notify my advisor and the internship coordinator. I understand that if the parameters of my position change, I may no longer be eligible for an on-the-job internship. I certify that I have completed all endorsement requirements (EPK3 only) and prerequisites and will conduct myself in a professional manner at all times during my internship. Should I withdraw or defer my application, I am also responsible for all fees incurred and for alerting my University Supervisor, Academic Program Advisor, and the Clinical Practice Specialist via a written request.

Signature of Internship Applicant: _______________________________________  Date: ______________________
MENTOR TEACHER (TO BE COMPLETED BY STUDENT WITH MENTOR TEACHER)
NOTE: The mentor teacher should be someone with at least 3 years of teaching experience and who is licensed in the area in which the student is completing the internship. The mentor teacher will provide written and verbal feedback regarding lesson planning and classroom instruction. S/he will meet with the intern no less than once every 2 weeks to complete university-required paperwork.

Name: ___________________________ E-mail: ___________________________ Phone: ___________________

Area/s of licensure/endorsement (exclude provisional/conditional): _______________________________________

Years of teaching experience: _________

Briefly describe the agreed upon schedule for meetings/feedback between the candidate and mentor teacher.
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

I certify that the information above is accurate, and I agree to fulfill the responsibilities of the mentor teacher, as outlined in the internship manual, during the period of the applicant’s internship.

Signature of Mentor Teacher: ____________________________________ Date: ________________________

PRINCIPAL/SITE DIRECTOR APPROVAL

I certify that the descriptions of the on-the-job internship setting and mentor teacher are accurate and that the division officials are aware of the necessary changes in employment status to fulfill the on-the-job internship.

Name of Principal/Site Director: __________________________________________

Signature of Principal/Site Director: _______________________________________ Date: _____________

ADVISOR REVIEW (To be completed by advisor)

I certify that the student has completed all endorsement and testing requirements to participate in this internship. I have reviewed the setting and supervision of the applicant’s current employment and agree that the placement is conducive to fulfilling the requirements for internship.

Signature of Advisor: _______________________________________ Date: _____________