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. If there is an issue regarding test completion for your application, you must contact the Educator Preparation Office at internsh@gmu.edu prior to the internship 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](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](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
- [ ] Printout of Degree Evaluation from Degree Works at time of application
- [ ] **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 Stacy Wilson, the Clinical Practice Specialist (Thompson 1708), **by the deadline.** If you are dropping your materials off after business hours, you may place packets in the drop box outside of Thompson 1700.

PLEASE NOTE THE DEADLINE:

- [ ] Spring Applications—September 15

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

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
Any changes in internship status must be reported to the Educator Preparation Office. If you withdraw from your internship, a new application and supporting documents are required by the following applicable semester deadline.

Please note the following:

- In order to be eligible for traditional internship placement through a cooperating public school division, applicants must have a valid social security number at the time of application submission.

- Scheduling Note: Internships follow the school divisions’ schedules. (For example, you will follow your school’s scheduled spring break) You will also be required to follow your mentor teacher’s daily schedule which in some cases, may require activities outside of typical school hours. Internships begin at least one week before the start of the Mason semester so that interns may participate in orientations and professional development days.

Student 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.

*I certify that I have read the previous steps/instructions carefully and I have included all required items checked on this list in my packet for advisor review and signature:

(Student signature)
Application for Student Teaching Internships

Semester: Spring  Year:_______

Name: ________________________________________________  Student G #

Last    First    Middle Initial

Current Address: ____________________________________________

Street         City     State    Zip    GMU E-Mail Address

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. Per school policy, you cannot be placed in these locations.

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.