

MUSIC EDUCATION APPLICATION FOR STUDENT TEACHING

Last Name _____ First Name _____ G# _____

STEP ONE: Establish Intent to Apply for Student Teaching

- Complete the ONLINE internship application: <http://cehd.gmu.edu/internship-application>
This online application must be completed before submitting the paper application.
- Meet with the academic advisor from the School of Music to obtain the following:
 - A signature for **Certification for Completion of Coursework** (page 3 or 4 of this document)
 - A printout from Banner/PatriotWeb indicating successful completion of the state test requirements:
 - Passing scores on the **VCLA**
 - Passing scores on the **Praxis Core Academic Skills for Educators Tests** or demonstrated equivalency.
 - Passing scores on the **Praxis Subject Assessment –Music Content Knowledge 5113**

STEP TWO: Assemble this Documentation and Attach to this Application in the Following Order:

- Signed **Certification of Completion of Coursework**
- Printout from Banner/PatriotWeb indicating completion of state test requirements.
- Certificate of completion of the **Child Abuse Recognition and Intervention Training** online course at: http://www.dss.virginia.gov/family/cps/mandated_reporters/cwse5691/story.html
- First Aid/CPR/AED Certification** (<http://cehd.gmu.edu/teacher/emergency-first-aid>)
- Unofficial copy of **GMU transcript**.
- Printout of **Degree Evaluation from Degree Works** at time of application
- Negative PPD/Skin TB test**. (This test must be dated within 12 months of the internship start date).
- Philosophy of Teaching** (one page, typed)
- Professional Goals Statement** (one page, typed)
- Resume**

STEP THREE: Signatures.

- Sign and date **Application for Student Teaching** (page 3 of this document).
- Schedule appointment with **endorsement area advisor** for application review and signature.

STEP FOUR: Application Submission.

- Make **THREE** photocopies of the signed application including this page and **ALL** attachments.
DEADLINE FOR SUBMITTING THIS APPLICATION (select one):
 - September 15 to intern in the Spring semester
 - February 15 to intern in the Fall semester
- Submit **ONE** of the **THREE** photocopies of the signed application including **ALL** attachments to the **Director of Music Education** on/or before the posted deadline.
- Submit **TWO** of the **THREE** photocopies of the signed application including **ALL** attachments **to the Clinical Practice Specialist** in the **Educator Preparation Office** (Thompson 1708) on/or before the posted deadline.

Retain the original copy of this application for your records. The Educator Preparation Office will not accept late applications. Withdrawing an application for student teaching will require a new application (including all attachments) during a subsequent semester on/or before the posted deadline. Students must contact the academic advisor in the School of Music for instructions pertaining to registering for MUSI 495 Internship in Music Education

MUSIC EDUCATION
 George Mason University
 College of Education and Human Development
 Thompson 1708, MS 6C13, 4400 University Drive
 Fairfax, VA 22030-4444

NOTE: Internship placements are requested through the Music Education Director and arranged through the Educator Preparation Office. Student contact with schools/districts for the sole purpose of securing intern placements is not permitted.	Semester of Internship - Year (check one): <input type="checkbox"/> Fall <input type="checkbox"/> Spring
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PART I: Personal Information

Name: _____
 Last First Middle Initial Student G #

Current Address: _____
 Street City State Zip

Home phone: _____ Cell phone: _____ GMU email: _____

PART II: Background Information

List all elementary, middle, and high schools attended using the following format and attach additional page if necessary:

School Name	Name of School District	Years Attended
School Name	Name of School District	Years Attended
School Name	Name of School District	Years Attended

List all elementary, middle, and high schools where immediate family members are currently employed in the following school districts: Alexandria City, Arlington County, Fairfax County, Falls Church City, Loudoun County, Manassas City, Manassas Park, and Prince William County. Use the following format and attach additional page if necessary. Leave this section blank if it does not apply

Name of Family Member	School Name	Name of School District
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PART III: Contract [READ CAREFULLY BEFORE SIGNING]

My signature certifies that I have completed all requirements for student teaching and that I will conduct myself in a professional manner at all times during the internship and will be bound by all the policies described in the Music Student Teaching Manual. I understand that my requests for internship placement may not be accommodated. I acknowledge that I will receive instructions via email to my gmu.edu address for submitting information to school districts for the purpose of conducting a background check and that time deadlines will apply for submitting this information –failure to submit this information on time, disclosing any/all legal incidents whether or not such incidents resulted in a conviction, or failing a background check can result in withdrawal and/or termination from student teaching. I acknowledge that I will be responsible for all fees incurred by the university should my application be withdrawn for not submitting this information, if I am terminated for failing a background check, or should I choose to withdraw my application past the university drop without penalty deadline. If I elect to withdraw, I will notify the Director of Music Education and the Clinical Practice Specialist in writing.

Student: _____ Date: _____
SIGNATURE MONTH/DAY/YEAR

My signature certifies that I have reviewed the application for student teaching including all attachments and signatures; that the student meets all program requirements, and hereby recommend the student for internship for the year and semester indicated on the application.

Endorsement Area Advisor: _____ Date: _____
SIGNATURE MONTH/DAY/YEAR

MUSIC EDUCATION: Certification for Completion of Coursework **BME**

Name: _____
Last First Middle Initial Student G #

Licensure: Music Education PK-12

Endorsement: (select one) Vocal/Choral Instrumental

Language(s) spoken in addition to English: _____

INSTRUCTIONS: Select one endorsement area. Type the grade earned for completed professional education course. Type CE for a professional education course currently enrolled in.

<input type="checkbox"/> Vocal General and Choral	<input type="checkbox"/> Instrumental Band
<input type="checkbox"/> EDRD 300 Literacy and Curriculum Integration <input type="checkbox"/> EDUC 301 Educationally Diverse Populations <input type="checkbox"/> EDUC 302 Human Development <input type="checkbox"/> MUSI 393 Music Administration and Management <input type="checkbox"/> MUSI 461 Teaching General Music in ES and MS <input type="checkbox"/> MUSI 463 Teaching Vocal Music in Secondary	<input type="checkbox"/> EDRD 300 Literacy and Curriculum Integration <input type="checkbox"/> EDUC 301 Educationally Diverse Populations <input type="checkbox"/> EDUC 302 Human Development <input type="checkbox"/> MUSI 393 Music Administration and Management <input type="checkbox"/> MUSI 464 Instrumental Music Methods I <input type="checkbox"/> MUSI 466 Instrumental Music Methods II
<input type="checkbox"/> Instrumental Orchestra	
<input type="checkbox"/> EDRD 300 Literacy and Curriculum Integration <input type="checkbox"/> EDUC 301 Educationally Diverse Populations <input type="checkbox"/> EDUC 302 Human Development <input type="checkbox"/> MUSI 393 Music Administration and Management <input type="checkbox"/> MUSI 467 Instrumental Music Methods I <input type="checkbox"/> MUSI 466 Instrumental Music Methods II	

RECORD OF FIELD EXPERIENCE: In this section, List field experience for each professional education course.

Course Code & Title	School Site	Subject/Grade Level

My signature certifies that I am either currently enrolled in, or have completed all professional education courses with the grade of a C or higher. I acknowledge that my application for internship will be withdrawn if I do not pass the MTEC Competency Check or if all coursework is not successfully completed prior to the semester of student teaching. I understand that enrolling in classes during internship is not permitted.

Student: _____
SIGNATURE

Date: _____
MONTH/DAY/YEAR

My signature certifies that I have reviewed the student's academic record and find –to the best of my knowledge– that the student is either currently enrolled, or has successfully completed all required coursework for student teaching.

Academic Advisor: _____
SIGNATURE

Date: _____
MONTH/DAY/YEAR

MUSIC EDUCATION: Certification for Completion of Coursework MELC

Name: _____
Last First Middle Initial Student G #

Licensure: Music Education PK-12 Endorsement: (select one) Vocal/Choral Instrumental

Language(s) spoken in addition to English: _____

INSTRUCTIONS: Select one endorsement area. Type the grade earned for completed professional education course. Type CE for a professional education course currently enrolled in.

<input type="checkbox"/> Vocal General and Choral	<input type="checkbox"/> Instrumental Band
<input type="checkbox"/> EDRD 501 Literacy and Curriculum Integration <input type="checkbox"/> EDUC 511 Child and Adolescent Development <input type="checkbox"/> MUSI 561 Music Curriculum and Instruction <input type="checkbox"/> MUSI 568 Vocal and Choral Methods <input type="checkbox"/> MUSI 593 Foundations of Music Education	<input type="checkbox"/> EDRD 501 Literacy and Curriculum Integration <input type="checkbox"/> EDUC 511 Child and Adolescent Development <input type="checkbox"/> MUSI 561 Music Curriculum and Instruction <input type="checkbox"/> MUSI 566 Instrumental Methods for Band <input type="checkbox"/> MUSI 593 Foundations of Music Education
Instrumental Orchestra	
<input type="checkbox"/> EDRD 501 Literacy and Curriculum Integration <input type="checkbox"/> EDUC 511 Child and Adolescent Development <input type="checkbox"/> MUSI 561 Music Curriculum and Instruction <input type="checkbox"/> MUSI 567 Instrumental Methods for Strings <input type="checkbox"/> MUSI 593 Foundations of Music Education	

RECORD OF FIELD EXPERIENCE: In this section, List field experience for each professional education course.

Course Code & Title	School Site	Subject/Grade Level

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Student: _____ Date: _____
SIGNATURE MONTH/DAY/YEAR

My signature certifies that I am either currently enrolled in, or have completed all professional education courses with the grade of a C or higher. I acknowledge that my application for internship will be withdrawn if I do not pass the MTEC Competency Check or if all coursework is not successfully completed prior to the semester of student teaching. I understand that enrolling in classes during internship is not permitted.

Academic Advisor: _____ Date: _____
SIGNATURE MONTH/DAY/YEAR