

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Student Mason Identification Number (G number) \_\_\_\_\_

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**Waiver Policy:**

With Advisor approval, students with two years\* of successful supervised full-time public or private school (Accredited Schools Only) teaching experience in the special education endorsement area(s) K-12 they are seeking can have one internship experience waived.

*\*Two years is defined as either two full academic years or calendar years from the date of initial contract. Teaching experience must be earned as the classroom teacher on record or with a full-time itinerant teacher caseload. Experience as a substitute teacher, paraprofessional or related services provider is not eligible.*

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**Implications:**

All students seeking GMU verification of approved licensure program completion ***must complete at least one three-credit hour internship, regardless of experience.*** Students meeting the documentation standards cited above may have the second internship waived.

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**Required Documentation:**

- ☐ A letter from a current building principal or evaluator (see page 3).
  - ☐ A letter from the building level special education professional such as the department chair or team leader (see page 4). This cannot be the same person as above.
  - ☐ A copy of two performance evaluations, one from each of two academic years, completed by school personnel, demonstrating satisfactory performance. Evaluations must include date and position held as well as signature of evaluator or principal. At least one end-of-year, summative evaluation must be included.
  - ☐ Documentation of teaching in the area of endorsement at both the elementary and secondary level OR write up of four hours of observation at the level opposite to that which you teach. The observed teacher write ups should have the date and time of the observation noted on them and the signature/s of the teacher/s who you observe. (see page 2)
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Email **complete** packet to [speced@gmu.edu](mailto:speced@gmu.edu).

It can take time to process the paperwork, so please submit your completed packet at least 4-6 weeks prior to graduation and/or submitting for licensure.

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## **Instructions for observation summary:**

Because you are earning a K–12 licensure, you must demonstrate experience at both elementary and secondary levels in the licensure area you are pursuing.

### **Who Needs to Complete Observations**

If you do not have documentation showing you have taught at both levels (elementary and secondary) in your licensure area, you must complete:

- 4 hours of “off-level” observation (observing at the level you have not taught)
- A written summary of your observations, submitted with your other waiver documents

#### *Example*

If you are teaching elementary Special Education – General Curriculum and completing your on-the-job internship in your elementary position, you must complete 4 hours of observation at the secondary level (middle or high school) with students who fall under the same special education – general curriculum.

- Elementary level = elementary school
- Secondary level = middle or high school

### **Purpose of the Observations**

These observations ensure you have exposure to multiple teaching levels and can apply what you’ve learned in your program at both. Choose classrooms that provide a significant difference in grade level. For example, if you currently teach 7th grade, it is recommended that your elementary observation be 4th grade or younger.

### **Write-Up Requirements**

Your observation write-up should:

- Be about 2–3 pages
- Include dates, times, and grade levels observed
- Describe:
  - Classroom structure (types of disabilities, ages, class type)
  - Teaching methods and strategies used
  - Classroom/behavior management techniques
  - How instructional and assessment methods differ at that level

### **Scheduling Observations**

You can complete the 4 hours in any combination that works for you (e.g., one 4-hour session, two 2-hour sessions) and can arrange observations on your own. If you need assistance, contact your advisor.

### **Teacher Sign-Off**

The teacher/s you observe must confirm your attendance by either:

- Signing a statement noting the date/time of your observation, or
- Sending you an email with that confirmation that you include with your waiver documentation

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**Principal Letter for Internship Waiver  
Special Education Program**

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**Graduate School of Education  
George Mason University**

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**To be completed by building principal or evaluator:**

Based on the attached two professional evaluations, I am requesting that George Mason University waive one of the three-credit hour internship requirements as part of the licensure program for \_\_\_\_\_. He/She has successfully taught  
(area of licensure program)

for two or more years at the \_\_\_\_\_ level in the  
(elementary/secondary)  
following disability area(s):

\_\_\_ Students with disabilities accessing the general curriculum, K-12

\_\_\_ Students with disabilities accessing an adapted curriculum, K-12

\_\_\_ Students with visual impairments, PK-12

**Building Principal or Evaluator:**

Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_

School: \_\_\_\_\_

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**Department Chair/Team Leader/Area Supervisor      Graduate School of Education**  
**Recommendation Letter for Internship Waiver      George Mason University**

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**To be completed by a building level special education professional or area supervisor such as a department chair or team leader:**

**Please evaluate the student on the following criteria:**

| Area of evaluation                                                                                                              | Inadequate Opportunity to Observe | Below Average | Average (Successful) | Above Average | Superior |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------|----------------------|---------------|----------|
| Proficient in reading, written and oral communications                                                                          |                                   |               |                      |               |          |
| Understands the general content area curricula                                                                                  |                                   |               |                      |               |          |
| Designs appropriate learning and performance accommodations and modifications for students with disabilities                    |                                   |               |                      |               |          |
| Has a solid knowledge base in the subject matter content sufficient to assure the students can meet state curriculum standards. |                                   |               |                      |               |          |

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**Complete the following letter:**

Based on the above evaluation I am requesting that George Mason University waive one of the three-credit hour internship requirements as part of the licensure program for

\_\_\_\_\_. I can verify that \_\_\_\_\_

(area of licensure program)

(teacher name)

was observed successfully teaching at the \_\_\_\_\_ level in the  
(elementary/secondary)

following disability area(s):

\_\_\_\_ Students with disabilities accessing the general curriculum, K-12

\_\_\_\_ Students with disabilities accessing an adapted curriculum, K-12

\_\_\_\_ Students with visual impairments, PK-12

***Special Education Department Chair, Team Leader or Area Supervisor:***

Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_

School: \_\_\_\_\_