Application for Admission to Student Teaching Internship

Applicant: Complete the application form below and email or maito the Education Department office.

| Semester of internshipSpring 202 Fall 202 | |
|---|--|
| Name | Soc. Sec. / / Date of application |
| Address | _ City State/zip code |
| Phone number | E-mail addr <u>ess</u> |
| Grade/Subject placement preferenceFirst choice Second choice | |
| School location preference: First choice _ | Secondhoice |
| Do not arrangeyour own placement -Long Term substitute positions (minimum at least a full semester) are acceptable. | |
| Schools in which immediate family members are employed/enrolled: | |
| Check the Education classes you have completed. | |
| ' EDEL 311 or EDSC 311 ' EDEL 313 or | EDSC 313 ' EDEL 315 or EDSC 315' EDRL 474 |
| ' EDEL 433 ' EDEL 443 ' EDEL 453 | ' EDRL 437 ' EDRL 442 ' EDRL 443 ' EPY 330 |
| | 439 ' EDSP 301 ' EDU 250 ' EDUC 323 ' EDUC 406 |