

ESL INTERNSHIP APPLICATION CHECKLIST

Last Name _____ First Name _____

G# _____

BEFORE TURNING IN YOUR APPLICATION:

- ☐ **Make an appointment with your advisor to review your completed application. Take with you:**
- ☐ Unofficial Mason transcript May be obtained via Patriot Web (<https://patriotweb.gmu.edu>).
- ☐ Completed application To be **SIGNED** by your advisor.

TESTING: PLEASE CHECK ALL THAT APPLY:

- ☐ ☐ **I have passed the VCLA (required for all students to obtain licensure after Dec. 31, 2006)**
- ☐ ☐ **I have passed the Praxis I**

APPLICATION WILL INCLUDE:

- ☐ Application Advisor's signature required.
- ☐ Unofficial Mason transcript
- ☐ A Goals Statement Two pages typed.
- ☐ A copy of your **passing** Praxis I scores If you don't have a copy on file with GMU, please request one from ETS (www.ets.org)
- ☐ A copy of your **passing** VCLA scores If you don't have a copy on file with GMU, please request one from ETS (www.va.nesinc.com).
- ☐ Negative TB test results If you are an employee of the school district where you intern, the test is not required.
- ☐ Current resume
- ☐ **Four (4) complete collated applications** Deliver to the School Placement Coordinator (Robinson A307), **by the deadline.**

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

CHECK THE APPLICABLE DEADLINE:

- ☐ Spring Applications—September 15
- ☐ Spring On-The-Job Applications—December 1
- ☐ Fall Applications—February 15
- ☐ Fall On-The-Job Applications—May 1

AFTER TURNING IN YOUR APPLICATION

- ☐ **Register for EDCI 790** Register for 6 credits on Patriot Web.
- ☐ Retain a copy of my application and supporting documents for my records

I certify that I have included the items checked on this list. _____

Endorsement Checklist **(to be included with the Application for Internship)**

Instructions: Please include one copy of the following documentation with your internship applications (**you need only submit one copy of this packet per your 5 internship applications**):

☐ This checklist

☐ Copies* of your previous endorsement forms and letters from both GMU and the Virginia Department of Education (if copies are available)

☐ Copies* of your transcripts and CLEP exam scores showing any endorsement courses that have been completed, or showing what courses are in progress

*Photocopies and or unofficial transcripts will be accepted

Name: _____

Program: _____

G#: _____

Phone #: _____

Are your endorsements complete? ☐ Yes ☐ No

If not, please briefly explain which endorsements are missing, and when they will be completed. Please note, **all endorsements** must be completed prior to beginning an internship:

ENGLISH AS A SECOND LANGUAGE PK-12

George Mason University College of Education and Human Development

Graduate School of Education
Robinson A307, MSN:4B4
4400 University Drive
Fairfax, VA 22030-4444
(703) 993-2080

Application for Student Teaching Internships

School Divisions: (Indicate first, second and third choices.) <input type="checkbox"/> Alexandria City <input type="checkbox"/> Manassas City <input type="checkbox"/> Falls Church City <input type="checkbox"/> Manassas Park <input type="checkbox"/> Fairfax County <input type="checkbox"/> Prince William County <input type="checkbox"/> Loudoun County <input type="checkbox"/> Arlington County <input type="checkbox"/> Other _____	____Year: ____ Fall ____Spring ____Summer
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Name: _____
Last First Middle Initial Student G #

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.

Licensure: English as a Second Language

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 School Placement Coordinator via a written request.

Student: _____
(Signature Required)

I certify that the student has completed all endorsement and other requirements to participate in this internship and meets the standards for a professional disposition.

Advisor: _____
(Signature Required)

Please note your college/university (Guest Matriculants Only): _____

Language(s) spoken in addition to English: _____

ENGLISH AS A SECOND LANGUAGE PK-12

Please indicate your foreign language coursework completed (6 cr. required):

<u>Courses</u>	<u>Grades</u>
_____	_____
_____	_____
_____	_____
_____	_____

Professional Education Courses:

Check courses completed or in which currently enrolled:

- ___ EDUC 537 – Foundations of Multicultural Education
- ___ EDUC 539 – Human Development and Learning PK-12
- ___ EDIT 504 - Introduction to Educational Technology
- ___ LING 520 – Descriptive Linguistics
- ___ EDCI 516 – Bilingualism and Language Acquisition Research
- ___ EDCI 519 - Methods of Teaching in Bilingual/ESL Settings
- ___ EDRD 615 – Teaching Reading/Writing in Multicultural Settings

Field Experiences in all Education Courses:

<u>Course Number</u>	<u>School</u>	<u>Subject/Grade Level</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____