

## SECONDARY EDUCATION (6-12) INTERNSHIP APPLICATION CHECKLIST

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
G# \_\_\_\_\_

### BEFORE TURNING IN YOUR APPLICATION

- ☐ **Make an appointment with your advisor; take with you two items:**
  - ☐ Unofficial Mason transcript; may be obtained via Patriot Web (<https://patriotweb.gmu.edu>)
  - ☐ Completed application 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) (or provide date you are scheduled to take it)**
- ☐ **I have passed the Praxis I and II (or provide date you are scheduled to take it)**

### APPLICATION WILL INCLUDE

- ☐ Application (Advisor's signature required)
- ☐ Unofficial Mason transcript
- ☐ A Goals Statement (Two typed pages)
- ☐ A copy of your **passing** Praxis I and Praxis II scores; if you don't have a copy on file with GMU, please request one from ETS ([www.ets.org](http://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 [www.va.nesinc.com](http://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. **Note: the test must be dated within the past 12 months.**
- ☐ Current resume
- ☐ **Four (4) complete and collated applications**; deliver to Field Placement Specialist (Robinson A308) **by the deadline.**
- ☐ Statement of Purpose (Secondary Professional Development School/SPDS applicants ONLY), describing why you would like to complete your internship in a PDS setting
- ☐ SPDS Recommendation Form (Secondary Professional Development School/SPDS applicants ONLY)

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

### CHECK THE APPLICABLE DEADLINE

- |   |  |
|---|--|
| <input type="checkbox"/> Spring Applications: September 15          | <input type="checkbox"/> Fall Applications: February 15      |
| <input type="checkbox"/> Spring On-The-Job Applications: December 1 | <input type="checkbox"/> Fall On-The-Job Applications: May 1 |

### AFTER TURNING IN YOUR APPLICATION

- ☐ Be sure to **Register** for EDCI 790. Register for 6 credits on Patriot Web **and EDRD 619**
- ☐ Retain a copy of the application and supporting documents for your records

I certify that I have included the items checked on this list. (Student Signature) \_\_\_\_\_

# **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 4 internship applications**):

- ☐ This checklist
- ☐ Copies of your previous endorsement forms and letters\* from GMU (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:**

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**SECONDARY EDUCATION (6-12) INTERNSHIP APPLICATION**  
**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**

<p style="text-align: center;"><b>Secondary Professional Development School (SPDS) Matches</b></p> <p style="text-align: center;"><u><b>Partner Schools</b></u></p> <p style="text-align: center;"><b>South Lakes High School (Fairfax County)</b>  <b>Hughes Middle School (Fairfax County)</b>  <b>Robinson Secondary School/9-12 (Fairfax County)</b>  <b>Robinson Secondary School/7-8 (Fairfax County)</b></p> <p>Note: If you are interested in an SPDS internship match, please also complete and submit the "Statement of Purpose" and "SPDS Recommendation Form"</p>	<p style="text-align: center;"><b>Traditional Matches School Divisions</b></p> <p style="text-align: center;">(Indicate first, second and third choices.)</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Alexandria City         <input type="checkbox"/> Loudoun County         <input type="checkbox"/> Arlington County         <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"/> Other       </div>	<p style="text-align: center;"><b>Desired Semester for Internship</b></p> <p>Year: _____</p> <p>____ Fall</p> <p>____ Spring</p>
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Name: \_\_\_\_\_

Last
First
Middle Initial
Student G #

Current Address: \_\_\_\_\_

Street
City
State
Zip

GMU Email Address: \_\_\_\_\_

Current Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_

**For the districts/divisions/schools where you request a match, list schools you attended, any school in which immediate family members are employed, or where you have children attending.**

\_\_\_\_\_  
 Licensure: Secondary 6-12 Initial Endorsement: \_\_\_\_\_

Additional Endorsement: \_\_\_\_\_

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 match 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 Match 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: \_\_\_\_\_

### FOR UNIVERSITY AND SCHOOL USE ONLY

#### RECOMMENDATION FOR FIRST MATCH

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

Telephone Number: \_\_\_\_\_

Subject/Grade Level(s)/Credits \_\_\_\_\_

Beginning and Ending Dates: \_\_\_\_\_

Clinical Faculty/Mentor Teacher(s): \_\_\_\_\_

Comments: \_\_\_\_\_

#### RECOMMENDATION FOR SECOND MATCH

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

Telephone Number: \_\_\_\_\_

Subject/Grade Level(s)/Credits \_\_\_\_\_

Beginning and Ending Dates: \_\_\_\_\_

Clinical Faculty/Mentor Teacher(s): \_\_\_\_\_

Comments: \_\_\_\_\_

### TO BE COMPLETED BY STUDENT: SECONDARY EDUCATION 6-12 ENDORSEMENT FORM

#### Content Courses Completed in Endorsement Area

Please list below the courses you have taken in your endorsement area:

##### Courses

##### Grades

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

##### Courses

##### Grades

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

#### Professional Education Courses

Check courses completed or in which currently enrolled:

\_\_\_ EDUC 522 - Foundations of Secondary Education

\_\_\_ EDCI 567 - Teaching Social Studies in the Secondary School

\_\_\_ EDCI 569 - Teaching English in the Secondary School

\_\_\_ EDCI 572 - Teaching Mathematics in the Secondary School

\_\_\_ EDCI 573 - Teaching Science in the Secondary School

\_\_\_ EDUC 672 – Human Development and Learning

\_\_\_ Advanced Methods Course (EDCI 667/Social Studies; EDCI 669/English; EDCI 672/Math; EDCI 673/Science)

**Field Experiences in all Education Courses**

Please list all Field Experiences below:

**Course Number****School****Subject/Grade**

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**Additional Material Required for Secondary Professional Development School (SPDS)  
Match Applications**

*Additional materials must be submitted with your completed application*

**Statement of Purpose**

Please attach a separate sheet or sheets with your responses to the following questions:

- 1) Why are you interested in participating in the SPDS Program through George Mason University?
- 2) What strengths would you bring to your internship?
- 3) What are some areas of your teaching that you hope to develop, or areas where you hope for support?
- 4) Any issues or concerns that you have which may conflict with your plans to participate in a fall internship?

**Recommendation Form**

Please submit the attached SPDS Recommendation Form, to be completed by an instructor from one of your secondary education courses. This instructor (a full-time or adjunct professor) should comment on your suitability for an SPDS internship experience. The completed Recommendation Form should be submitted in a sealed, signed envelope.

***Note: Qualified SPDS applicants will be invited via email to attend an information meeting, group interviews, and site visits to partner schools.***

*Revised Sept. 2009*

**Application for Secondary Professional Development School (SPDS) Match  
Recommendation Form**

**Name of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Internship Semester/Year:** \_\_\_\_\_

**Directions:** Please rate the applicant on each of the categories listed in the table below, which are based on The NAPDS “Nine Essentials” and the NCATE PDS Standards. Then, provide some comments that underscore the unique qualities that the applicant will bring to a SPDS internship match.

	Superior	Above Average	Average	Below Average
Participation in collaborative planning and problem solving				
Knowledge of and commitment to diversity and equity in P-12 schools				
Commitment to ongoing professional development				
Commitment to reflective and innovative practice				

**Comments (Please continue on an additional page, if necessary):**

**Recommender's Name/Position:** \_\_\_\_\_

**Email Address/Phone Number:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**I have known the applicant since** \_\_\_\_\_.