

**The George Washington University  
School of Education and Human Development  
Office of Laboratory Experiences  
Phone: (202) 994-6166**

***Professional Internship in Elementary Education: Application Form  
Fall Semester - Internship IA & IB***

**Instructions:** Please type. Schedule an appointment to have your academic advisor sign the form and then submit it to OLE along with the following required documents:

- (1) **Autobiography** - a two-page typewritten statement (autobiographical information, description of related work experience, and special skills related to teaching).
- (2) **Courses** - a copy of your transcript or a typed list of completed courses.
- (3) **Original TB Certificate**-Less than a year old.

Name: \_\_\_\_\_ S.S.#: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Birth Date: \_\_\_/\_\_\_/\_\_\_ Sex: F/M Current GPA: \_\_\_ Do you speak Spanish Y / N Transportation (*car*) Y/ N

High School Attended: \_\_\_\_\_ University Attended: \_\_\_\_\_

Undergraduate Major: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Area schools where relatives of students are employed: \_\_\_\_\_

**Note: Special circumstance requests should be submitted in writing to the Director of OLE, Dr. Patricia Tate.**

|  |  |   |                                  |
|--|--|---|----------------------------------|
| <input type="checkbox"/> Alexandria City | <input type="checkbox"/> Arlington         | <input type="checkbox"/> District of Columbia | <input type="checkbox"/> Fairfax |
| <input type="checkbox"/> Montgomery      | <input type="checkbox"/> Falls Church City | <input type="checkbox"/> Other _____          | (specify)                        |

In the space below, prioritize requests for a particular grade, subject, or other special consideration. Remember these are only a guide for the supervisor in selecting placement. Other factors are considered, such as availability of sites and the University's commitment to provide students with a variety of fieldwork experiences.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Previous Fieldwork: List any school sites in which you observed/participated for education courses.  
\_\_\_\_\_  
\_\_\_\_\_

Prerequisites for Internship IA & IB: Your education advisor must confirm that you have completed the prerequisite courses. To facilitate this process, please fill out the following before you request a signature.

|                                       |              |             |                  |
|---------------------------------------|--------------|-------------|------------------|
| TRED 204 Perspectives in American Ed  | Sem/Yr _____ | Grade _____ | Instructor _____ |
| TRED 206 Teaching & Learning          | Sem/Yr _____ | Grade _____ | Instructor _____ |
| TRED 208 Development & Diversity      | Sem/Yr _____ | Grade _____ | Instructor _____ |
| SPED 290 Affective Dev & Behavior Mgt | Sem/Yr _____ | Grade _____ | Instructor _____ |
| TRED 211 Content Area Methods         | Sem/Yr _____ | Grade _____ | Instructor _____ |
| TRED 222 Reading Course               | Sem/Yr _____ | Grade _____ | Instructor _____ |

In addition to Internship IA & IB, what education and/or non-education courses do you still need to complete your degree and licensing requirements? Please list: \_\_\_\_\_

I have read the application requirements listed above and verify that all information is correct

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Program Director Use Only**

\_\_\_\_\_ is approved for Internship IA & IB during the Fall semester (year),  
and has successfully completed the academic work required prior to the Internship experience with a Quality Point Index of at

least 2.75.

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