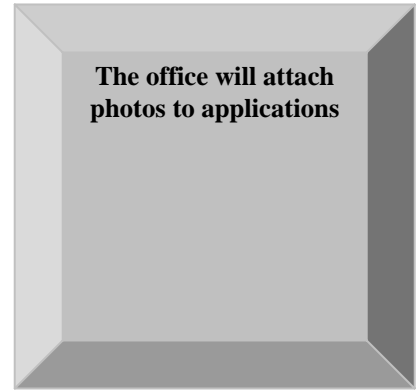


INTERNSHIP APPLICATION AGREEMENT

Semester Interning Spring, Year 2009

Directions: Type or print by computer all information except where otherwise noted. Submit three copies of application to the Office of Field Experiences by the application deadline for the term of internship.



Part 1. INTERN INFORMATION

_____		_____
(Name)	Last, First, Maiden	(UNF-N#)
_____		_____
(Address)	Street, Apt.#, City, State, Zip	(Phone) Home
_____	_____	_____
(Phone)	Work (E-mail)	(Sex) (Race)
_____	_____	_____
(Date of Birth)	(Country of Birth)	(Military Service) Branch, Rank

Part 2. PLACEMENT REQUEST

Interns are assigned to **public schools only in Baker, Bradford, Clay, Columbia, Duval, Nassau, Putnam, St. Johns and Union Counties**. You may request an area (ex. Westside Jacksonville) and an attempt will be made to place you there, however, the University and the County will determine the most appropriate placement for each student, which may include working with diverse student populations. **All placement decisions are final. All communication with school district personnel should be from the Office of Field Experiences. Students should NOT call a county office or school concerning placement.**

_____		_____
(County requested)		(Area requested)
_____		_____
(Major – as listed on your program of study Ex. Special Education) Music majors list choral or instrumental		(Program – as listed on your program of study Ex. Elem. K-6)
Check one:	<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Graduate <input type="checkbox"/> Teacher Certification Only
_____	_____	_____
(Field Experience I School)	(Term/Year)	(Grade Level)
_____	_____	_____
(Field Experience II School)	(Term/Year)	(Grade Level)

You may **NOT** intern in a school where you are or have been employed, have close relatives teaching or children enrolled. List all schools and relationships, if applicable:

PART 3. ACADEMIC HISTORY

Please submit a copy of your unofficial UNF transcript with each copy of your application.

Please complete this portion:

Name of High School

Location of High School (City, State)

Other Colleges Attended:

Degree Awarded _____

Degree Awarded _____

Degree Awarded _____

Part 4. SPECIAL REQUESTS

Internship is a full-time commitment. **Students are are not permitted to enroll in courses other than internship during the semester of internship.** However, when extenuating circumstances exist, a student may petition the College for an exception to take a course concurrently or following internship. Obtain the petition form from the Office of Field Experiences and attach a copy of the approved petition to your application.

FIELD ACCOMMODATION

If you have a disability, which will require accommodations during the internship, please describe the type of disability and specify the accommodations you will require (e.g. interpreting, physical limitations, etc.)

Part 5. ESSAYS

Directions: Write an essay that addresses each question below. Each essay must be a minimum of one page in length. Essays must be typed. You may attach additional pages as needed. PLEASE NUMBER OR TITLE EACH ESSAY - DO NOT RENAME THE ESSAYS.

1. Explain your personal feelings and beliefs about teaching.
2. Discuss the strengths that you bring to the teaching profession.
3. What is the biggest challenge that you may encounter during the internship?
How will you deal with the challenge?

Part 6: PERSONAL BACKGROUND

A background check and fingerprinting are required by all counties. Intern applicants will receive information regarding the status of their fingerprint clearances and procedures for the fingerprinting process. Please follow the procedures and guidelines specified in the letter.

NOTE: Counties may refuse to host an internship applicant based on the background check/fingerprinting results.

Part 7. ACKNOWLEDGMENT

I have read and understand the conditions of internship and agree that I will fulfill the obligations of this agreement. I understand that there can be no guarantee of placement as requested, that all internship placement decisions are final, and agree to accept the placement assigned. I agree to abide by all policies, rules and regulations of the University of North Florida, College of Education and Human Services, and the cooperating school and school district in which I am placed. I hereby give my consent for the Office of Educational Field Experiences to release all information contained in this application to the county, to the principal of the school to which I am assigned, to my directing teacher and my college supervisor.

If, for any reason, I am unable to fulfill my internship commitment, I will notify the Office of Field Educational Experiences immediately in writing.

(Date)

(Intern Signature)

FIRST AID/CPR CERTIFICATION

First Aid and CPR Certification is required of all applicants for internship. You must complete the CPR/First Aid Certification offered by the American Red Cross (358-8091) or through UNF's Health Promotion (620-1570), or other certified provider. Attach a valid, current copy of the front and back of the card(s) with your application. However, if you have not completed the course prior to the deadline, you will be given ample time to do so. Equivalent courses, such as those offered by the American Heart Association are acceptable provided first aid and CPR are both included.

INTERNSHIP APPLICATION INVOICE

Instructions to student intern: Take this page to the office of the Cashier in Building 1 and pay the application and materials fee. This is a non-refundable fee, which covers all of the forms and materials used for your internship. The Cashier will give you a receipt, which should be attached to your application. Be sure to make a copy for your records since duplicate receipts cannot be issued and your application will not be accepted without the receipt attached.

CASHIER

Purpose: To purchase application, printed materials and forms for Internship

Fee: \$30.00

Budget Account: 630106 771024