

**DEPARTMENT OF EDUCATIONAL ADMINISTRATION
MISSOURI STATE UNIVERSITY
INTERNSHIP APPLICATION
EAD Building Level Administrator and Superintendency**

THIS INTERNSHIP APPLICATION MUST BE ON FILE IN THE DEPARTMENTAL OFFICE PRIOR TO REGISTERING FOR THE INTERNSHIP.

**** MOVECHS FBI Background Check, and Professional Liability Insurance are required prior to enrolling in Building Level Administrator and Superintendency Internships****

1. NAME: _____ DATE: _____
2. STREET ADDRESS: _____ CITY/STATE/ZIP: _____
3. PHONE: _____ E-MAIL ADDRESS _____
4. PRESENT POSITION: _____ LOCATION: _____ PHONE _____
5. CERTIFICATE NOW HELD (UNDERGRADUATE AND/OR GRADUATE): _____
6. PRESENT DEGREE PROGRAM PURSUED (CHECK ONE) MASTERS _____ SPECIALIST _____
7. UNIVERSITY ADVISOR _____
8. DO YOU HAVE AN ADVISOR APPROVED PROGRAM OF STUDY ON FILE? YES ___ NO ___ PENDING ___
9. PERIOD IN WHICH YOU DESIRE TO BE ENROLLED, IF APPLICATION IS APPROVED. PLEASE FILL IN THE APPROPRIATE DATES (FOR ALL INTERNSHIPS, IF POSSIBLE)

Fall	Hours	Spring	Hours	Total Hours
	1 Hour/Class		1 Hour/Class	
Principal K-12		Principal K-12		
Off-Site		Off-Site		
50 Hour Add-On		50 Hour Add-On		
Supt.		Supt.		
SPED		SPED		

<u>SCHOOL</u>	<u>LOCAL SUPERVISOR & POSITION</u> (PRINCIPAL/SUPERINTENDENT)	<u>POSITION HELD SINCE</u>
ELEM _____	_____	_____
M.S./JR.HI. _____	_____	_____
HS _____	_____	_____
SUPT _____	_____	_____
DIR. SP. ED. _____	_____	_____

DATE	UNIVERSITY ADVISOR'S SIGNATURE	<u>INTERN'S SIGNATURE</u>
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NOTICE: IF YOU HAVE A CHANGE OF ADDRESS OR PHONE, PLEASE CORRECT THE APPLICATION

_____ IMPORTANT INFORMATION AND NECESSARY SIGNATURE ON BACK _____

*****READ THIS*****

FOR WHICH YOU HAVE APPLIED, COURSE CODES

- EAD 790 – On-site Internship – Part I (K=12Principal)
- EAD 791 – On-site Internship – Part II (K-12 Principal)
- EAD 792 – Off-site Internship – (Related Agencies)
- EAD 793 – K-12 Add-On
- EAD 882 – Superintendent Internship – Part I
- EAD 883 – Superintendent Internship – Part II
- EAD 886 – Superintendent Internship – Part III
- EAD 884 – Dir. Of Special Ed. Internship – Part I
- EAD 885 – Dir. Of Special Ed. Internship – Part II

BEFORE SUBMITTING YOUR APPLICATION FOR ON-SITE INTERNSHIPS, YOU MUST GET APPROVAL AND A SIGNATURE FROM YOUR LOCAL SUPERVISOR (PRINCIPAL, SUPERINTENDENT, OR DIRECTOR OF SPECIAL EDUCATION).

DO NOT SUBMIT YOUR APPLICATION UNTIL ALL REQUIRED INFORMATION HAS BEEN FURNISHED AND SUPERVISOR’S SIGNATURE HAS BEEN SECURED.

Students should submit a signed PDF to your Internship Instructor and they will have the MSU Supervisor sign it.

SUPERVISOR’S SIGNATURE

TITLE

PHONE NUMBER

DATE

