

**EARLY CHILDHOOD
SPECIAL EDUCATION
EXTERNSHIP**

DUE DATE
September 1st for the Spring
February 1st for the Summer

Revised December 2019

APPLICATION FOR EXTERNSHIP
ECSE 700: Early Childhood Special Education (ECSE)
Students must be accepted into Teacher Preparation in order to apply.

Applications are due: February 1st for summer externship and September 1st for spring externship
Submit your application to Serra De Arment

Application must be accompanied by **a copy of your resume**, passing **SAT, ACT or GRE scores, VCLA score report, unofficial copy of your VCU transcripts and copy of your provisional license (if applicable)**. *All parts of the application and accompanying documents must be typed or written legibly.*

NAME _____ Student No. _____
(LAST) (FIRST) (MIDDLE)

ADDRESS _____
(STREET) (CITY) (STATE) (ZIP)

DAYTIME TELEPHONE _____ HOME TELEPHONE _____

E-MAIL _____ GPA _____

CURRENT EMPLOYER: _____

TEACHER CERTIFICATION CURRENTLY HELD:

COLLEGIATE PROFESSIONAL _____ PROVISIONAL _____ POSTGRADUATE PROFESSIONAL _____ NONE _____

SEMESTER FOR PLACEMENT: FALL _____ SPRING _____ SUMMER _____ YEAR: _____

SEMESTER CREDIT HOURS: 1 HOUR _____ 2 HOURS _____ 3 HOURS _____

DESIRED PLACEMENT LEVEL: Infant Externship _____ Preschool Externship _____

ARE YOU REQUESTING AN "ON THE JOB SITE" EXTERNSHIP PLACEMENT: YES _____ NO _____

NAME OF SCHOOL DIVISION OR AGENCY REQUESTED:

Division or Agency: _____ Name of School: _____

Name of Cooperating Professional (Supervisor): _____

Supervisor's Years of Experience: _____ Email _____

Supervisor's Licensure Certification and Endorsements: _____

(Continued on back)

Licensure Eligibility Confirmation (Background questions – adopted from VDOE licensure application, July 2018)

PLEASE READ CAREFULLY AND CHECK Y (yes) or N (no)	Y	N
Have you ever been convicted of, or entered a plea of guilty or no contest to, a felony?		
Have you ever been convicted of, or entered a plea of guilty or no contest to, a criminal offense in another country?		
Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving a child (minor) or a student?		
Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving drugs or alcohol?		
Have you ever been the subject of a founded complaint of child abuse or neglect by a child protection agency?		
Have you ever had a teaching, administrator, pupil personnel services, or other education-related certificate or license revoked, suspended, invalidated, cancelled, or denied by another state, territory, or country; surrendered such a license or the right to apply for such a license; or had any other adverse action taken against such a license? <i>Please note:</i> This includes a reprimand, warning, or reproof and any order denying the right to apply or reapply for a license.		
Are you currently the subject of any review, inquiry, investigation, or appeal of alleged misconduct that could warrant discipline or termination by a school division or other education-related employer or an adverse action against a teaching, administrator, pupil personnel services, or other education-related license or certificate? <i>Please note:</i> This includes any open investigation by or pending proceeding with a child protection agency and any pending criminal charges.		
Have you ever left any education-or school-related employment, voluntarily or involuntarily, under any of the following circumstances: (1) while the subject of a review, inquiry, investigation, or appeal of alleged misconduct; (2) when you had reason to believe a review, inquiry, investigation or appeal of alleged misconduct was under way or imminent; or (3) while any administrative or judicial proceeding involving and allegation of misconduct was pending, eligible for appeal, or under appeal? <i>Please note:</i> This includes any open investigation by or pending proceeding with a child protection agency and any pending criminal charges.		

Permission to Release confidential information:

I, _____ (print full name), am aware of and agree to the forwarding of my email, application, personal statement, transcript, TB results, and background check payment (if applicable) for the purpose of securing internship/student teaching placement(s) in a school(s) in one or more of the following school division(s): Henrico, Chesterfield, Hanover or Richmond.

Student's Signature _____ Date _____

Advisor's Signature _____ Date _____

DO NOT WRITE BELOW THIS LINE – APPROVED SCHOOL DIVISION/AGENCY USE ONLY

SITE SUPERVISOR/PRINCIPAL

DATE

SCHOOL/AGENCY

SUPERVISING TEACHER/COUNSELOR/ADMINISTRATOR

COORDINATOR

DATE

Return to:

VCU School of Education, Serra De Ament
P. O. Box 842020
Richmond, Virginia 23284-2020