

Instructional Leadership Residency Application/Mentor Agreement

****To be submitted prior to registering for EDL 599****

Spring Internship Forms Due: September 10; Fall Internship Forms Due: February 1

Please submit all Residency Application forms to **Teacher Education Services** in

Wills 207 **OR** by email to celliso6@montevallo.edu

Please note: Successful completion of the Educational Leadership: Administration and Supervision Praxis test (5412) is required for certification in Instructional Leadership. Go to <http://www.ets.org/praxis/al> for more information. A checklist for certification requirements may be found on the TES website.

Proposed Semester of Residency:

Current School & District:

Please Print

Name:

Home Address:

Two Contact Numbers --
(indicate home, cell, work, etc.)

Contact 1:

Contact 2:

Two Email Contacts --
(UM & an additional email)

UM Email Address:

Additional Email:

Main Site(s) for Residency --

****Main & auxiliary sites must cover multiple ages (for example, an elementary and a secondary school placement). Also, residency sites should not be at your school of employment unless special permission is granted.**

School Site One:

School District-

District Contact (include name, email & phone)-

Site Mentor (include name, email & phone)-

Auxiliary Site for Residency--

****Main & auxiliary sites must cover multiple ages (for example, an elementary and a secondary school placement). Also, residency sites should not be at your school of employment unless special permission is granted.**

Students may also choose to complete some of their days at the Central Office level as long as it is approved with their Residency supervisor.

School Site Two:

School District-

District Contact (include name, email & phone)-

Site Mentor (include name, email & phone)-

Along with your application, please submit the following documentation 1) Letter or email from your proposed residency site(s) with confirmation that you will be allowed to complete your residency with the indicated mentor(s), 2) Documentation from your school/system that you will be allowed to complete your 10-day residency during the semester proposed, 3) Verification form on Instructional Leadership Preparedness for Residency, and 4) Waiver for Partial Completion of the Residency in the Summer (if necessary).

Your Employing Principal's Signature

Printed Name

Email

Date