University of Montevallo
College of Education
Office of Field and Clinical Experiences

Please submit the application to TES/Wills 207 or by email:
Christi Ellison-TES Program Asst. celliso6@montevallo.edu

Internship Application
Alternative Master's

Due Dates:
Spring Internship applicants: September 1st
Fall Internship applicants: February 1st

Semester of Internship (circle): Fall 20____ Spring 20____ Social Security #_____

Name: _____ _____ _____ _____

Last First Middle Maiden

UM ID#: _____ Advisor: _____

Forum Email Address:_____@forum.montevallo.edu

Home Phone #: _____ Cell Phone #: _____

Address during Internship: ***DO NOT LIST DORM ROOM NUMBER*** **UM P.O. #_____**

Address during Internship: _____

(Street) (City) (State) (Zip Code)

Please circle your respective teaching field and concentration below:

Elementary (K-6)	**Secondary (6-12)**	**EDHH/Music (P-12)**
Elementary	Biology	Art
Collaborative K-6	Business Marketing	Educ of the Deaf and Hard of Hearing
	Chemistry	Music - Choral
	Collaborative 6-12	Music - Instrumental
	English/Language Arts	
	Family & Consumer Sciences	
	General Science	
	History	
	Mathematics	
	Social Science	
	Spanish	

Do you have any relatives who work in or attend an area school? If yes, where? _____

_____

Where did you attend high school? (Secondary/P-12 majors only) _____

Do you anticipate being employed as a full-time teacher during the internship? Yes/No

If yes: School:_____System: _____

Other special considerations:_____

Please see Internship Handbook for internship placement information.

I understand that immoral conduct, unbecoming or indecent behavior, or conviction of a felony may preclude the possibility of gaining Alabama certification even though, in the absence of such knowledge, the University of Montevallo may have recommended certification.

Signature: _____ Date of Application: _____