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 Undergraduate

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

Semester/Year 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. #**_____

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

Please circle your respective teaching field and concentration below:

Elementary (K-6)	**Secondary (6-12)**	**P-12***
Elementary Elem/Collab (K-6)	Family & Consumer Sciences	Education of the Deaf and Hard of Hearing Music-Choral Music- Instrumental **P-12 students will be assigned a "split placement" (elementary and middle/high school)*

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) _____

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: _____