October 25, 2019

Dear Candidate:

Congratulations on having reached this point in your teacher preparation program. The Teacher Candidate Internship is the capstone experience to becoming a licensed professional teacher and we want to do everything possible to assist you in successfully meeting that goal.

To better serve you and ensure your application is processed timely by the school division for a Fall 2020 teacher candidate internship placement, please follow the guidelines below:

- **Regular Deadline for submission of the application is February 1, 2020 for all locations.**
- **Submit an application fee with your teacher candidate internship placement application.**
  
  The fee should be paid by personal check or money order (NO cash or credit cards will be accepted).
  
  Checks or money orders should be made out to “Old Dominion University.”
  
  Any returned checks will result in a financial hold placed on the student’s record. This type of hold, if not cleared, may prevent registration and delay in licensure.
- **Application fee for submission by the deadlines:**
  
  - $25 for applications received by the Regular Deadline of February 1, 2020 *(this fee is non-refundable)*
  
  Candidates submitting their application late, after the regular deadline, are **NOT** guaranteed an internship placement for the semester requested:
  
  - $35 for applications received after the deadline of February 1, 2020, by March 1, 2020
  - $45 for applications received after March 1, 2020, by April 1, 2020
  
  Applications will not be accepted after April 1, 2019.
  
  **THE APPLICATION FEE IS NON-REFUNDABLE**

  ➔ The Advisor Approval form attached to the application MUST be completed and signed by you and your advisor to ensure you are meeting all requirements and you will be ready to begin the internship.

  ➔ Candidates may not be placed at a school where a relative attends or works. Candidates must disclose this information on the internship application. If a candidate is found to be at a school where a relative attends or works, the candidate will be removed and will complete the internship experience the next available semester.

  ➔ Candidates may not be placed at a high school they attended or at a high school they graduated from.

  ➔ Complete and sign the Old Dominion University Authorization for Release of Disciplinary Records form.
Student Teacher Candidate Orientation

- Monday, August 17, 2020, 8:30 am – 4:30 pm; lunch will be provided for on-campus attendees
- Tuesday, August 18, 2020, from 8:30 am – 4:30 pm; lunch will be provided for on-campus attendees; and
- Wednesday, August 19, 2020, 8:30 am – 1:00 pm (no lunch provided)

**Attendance is mandatory.**
Your internship request will be cancelled if you do not attend the Orientation.

➤ For all candidates who are in the Hampton Roads area, the Orientation will take place on campus, location TBD.

➤ For all Distance Learning candidates who are outside the Hampton Roads area (beyond Isle of Wight and Williamsburg), the **Orientation will be provided live (real time) via WebEx.** An e-mail with the WebEx information will be sent out to distance learning candidates prior to orientation.

➤ Visits with clinical faculty will occur August 26-30. **Candidates should be available to attend.**

The following requirements must be on file with the Office of Clinical Experiences, Education Building, Room 2345, by August 1, 2020:

- Acceptance into a teacher education program;
- Reported scores (passing/not passing) for Praxis Core Math, SAT math or ACT math;
- Passing scores on Praxis Subject Assessment (formerly Praxis II), including individual sub-test scores on the back page;
- Passing scores on the Virginia Communication and Literacy Assessment;
- Passing score on the required reading assessment (RVE for Pk-3, Pk-6 and special education programs);
- First Aid/CPR/AED hands on training;
- **Dyslexia Awareness Training;**
- **Child Abuse and Neglect Recognition and Intervention Training;**
- Successful completion of the **Clearance Process:**
  - If you have successfully completed this process and have been previously cleared by ODU, you do not need to complete this clearance process.
  - If you need to be re-activated/re-admitted to the University after being absent from ODU, you are required to complete the ODU Field Experience Clearance Procedures, prior to Orientation
- **ALL course work, content and professional education courses as listed in your curriculum, must be completed with the required grades;**
- **ALL GPA and grade requirements must be met as listed in your curriculum;**
- **Transcripts from external institutions documenting completion of required courses; and**
- A copy of a negative TB test or screening results, completed within one year of the beginning of your Teacher Candidate Internship experience is required by all school districts. **DO NOT submit the test results to the Office of Clinical Experiences.** You may be asked to submit a copy of your test results to the administrator of your assigned school.
Review the Teacher Candidate Internship Handbook

- Students may use an electronic device to access the handbook during orientation but are responsible for all materials within the handbook.

CANDIDATES ARE NOT PERMITTED to contact school division personnel regarding placement until notified by the Office of Clinical Experiences staff.

After reviewing your application and your academic record, you will receive an e-mail notification that your internship application was received after April 1st. It is imperative that you continue to meet all GPA and program requirements, since your academic progress will be reviewed again at the end of the current semester.

Please contact your program advisor or distance learning site director, if you have any questions concerning this application process. You may call me at 757-683-6448 or e-mail me at rjohn@odu.edu, if further clarification is needed.

Sincerely,

Rebecca John

Rebecca John, Ph.D.

Associate Director, Office of Clinical Experiences
APPLICATION FOR TEACHER CANDIDATE INTERNSHIP

Print all information.

Last Name                                First Name                                     Middle Initial              Area Code/ Telephone Number
_____________________________________________________________________________________________________________

Address:                   Street                             City                                     State        Zip
_____________________________________________________________________________________________________________

SSN: ________________Date of Birth _______________ UIN: _____________________ ODU E-mail: ________________________

Teaching Endorsement Area: ___________________Program: _____________(Undergraduate (UG), Graduate (GR), Post-baccalaureate (PB))

*Teacher candidates MAY NOT be placed in the same school where a person they are related to attends or works. List below the name of the school(s) that should not be included in your request for placement on the “Placement Information Sheet”:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Fill in the information below for observation and practicum completed:

Observation Semester/year: ____________ Subject/Grade Level: _____________ School: _______________________

Practicum Semester/year: _____________ Subject/Grade Level: _____________ School: ___________________________

Practicum Semester/year: ______________ Subject/Grade Level: _____________ School: _________________________

Please indicate your choice district for the teacher candidate internship placement. Please check the Office of Clinical Experiences website and fill out any additional forms required by the district that is being requested.

1) ____________________________________ ______________________    _____________
   Name of School District                                   City   State

*Out-of-State Teacher Candidate Internship Policy Information

*Please note that while you may identify specific information, requests are not guaranteed.

Student Teaching with a School District Contract (Mentorship option): Candidates who receive an offer of employment at the time of student teaching should notify the Office of Clinical Experiences immediately
Teacher Candidate Internship Placement Information Sheet

This sheet provides information regarding Teacher Candidate Internship placement and endorsement grade levels for candidates in our various teacher preparation programs. Please **circle** your program, endorsement grade levels, and your placement selection. If a choice indicated by the word "or" is shown in the placement column for your program, please **circle** your choice. This is based on previous practicum settings.

<table>
<thead>
<tr>
<th>Program</th>
<th>Licensure Grade Levels</th>
<th>Placements</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BACHELOR’S DEGREE IN:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>English, History, Biology, Chemistry, Earth Science, Physics, Mathematics, Technology Education, Marketing Education</td>
<td>6-12</td>
<td>Middle School (14 weeks) or High School (14 weeks)</td>
</tr>
<tr>
<td>Art, Dance, Foreign Languages, Theatre</td>
<td>K-12</td>
<td>Elementary (7 weeks) and Middle or High (7 weeks)</td>
</tr>
<tr>
<td>Special Education</td>
<td>Birth – Age 5</td>
<td>Select two 7-week placements: Early/Primary (7 weeks) Elementary (7 weeks) Middle (7 weeks) High School (7 weeks)</td>
</tr>
<tr>
<td>- Identify Content Area: SECA, SPEL, SPEN</td>
<td>K-12</td>
<td></td>
</tr>
<tr>
<td><strong>MONARCH TEACH</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Identify Content Area: Math, Science (Biology, Chemistry, Earth Science, Physics) or Tech Education</td>
<td>6-12</td>
<td>Middle School (10 weeks) or High School (10 weeks)</td>
</tr>
<tr>
<td>Music:</td>
<td>K-12</td>
<td>Elementary (7 weeks) and Middle or High (7 weeks) Middle (7 weeks) and High (7 weeks)</td>
</tr>
<tr>
<td>- Identify Content Area: Instrumental (Band or Orchestra) or Vocal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health and Physical Education</td>
<td>K-12</td>
<td>Elementary (7 weeks) and Middle or High (7 weeks)</td>
</tr>
<tr>
<td>- Identify Content Area: General Curriculum or Adapted Curriculum</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>POST-BACCALAUREATE ENDORSEMENT:</strong></td>
<td>K-12, Pk-3, 6-8, 9-12</td>
<td>14-week placement</td>
</tr>
<tr>
<td>- Identify Content Area:</td>
<td>Foreign Language K-12</td>
<td></td>
</tr>
<tr>
<td><strong>MASTER’S DEGREE IN:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Special Education</td>
<td>K-12</td>
<td>Select two 7-week placements: Early/Primary (7 weeks) Elementary (7 weeks) Middle (7 weeks) High School (7 weeks) Early/Primary (14 weeks)</td>
</tr>
<tr>
<td>- General Curriculum</td>
<td>K-12</td>
<td></td>
</tr>
<tr>
<td>- Adapted Curriculum</td>
<td>Birth – Age 5</td>
<td></td>
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<tr>
<td>- Early Childhood Education</td>
<td></td>
<td></td>
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<tr>
<td>Speech Language Disorders</td>
<td>K-12</td>
<td>Elementary Education (14 weeks)</td>
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<td>- 300 hours</td>
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<tr>
<td>School Counseling</td>
<td>K-12</td>
<td>Elementary Education (16 weeks) Middle School (16 weeks) High School (16 weeks)</td>
</tr>
<tr>
<td>Library Media</td>
<td>K-12</td>
<td>Elementary (14 weeks) Secondary (14 weeks) Elementary (7 weeks) Secondary (7 weeks)</td>
</tr>
<tr>
<td>Elementary Education</td>
<td>Pk-6, Pk-3, 6-8</td>
<td>Primary/Elementary (14 weeks) Middle (14 weeks)</td>
</tr>
<tr>
<td>- Early Childhood Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Middle School, Content Area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TESOL</td>
<td>K-12</td>
<td>Two 7-week placements</td>
</tr>
<tr>
<td>Secondary Education</td>
<td>6-12</td>
<td>Middle School (14 weeks) or High School (14 weeks)</td>
</tr>
</tbody>
</table>
ADVISOR APPROVAL FOR TEACHER CANDIDATE INTERNSHIP

This form must be completed and signed in consultation with the academic program advisor/site director prior to submitting this application. Schedule an appointment with your academic program advisor/site director prior to the deadline, as indicated on the cover letter above.

Candidate’s Name: ______________________ UIN ________________
Program: Undergraduate □ Graduate □ Post-baccalaureate □
Undergraduate GPA: _______ CUM ________
Major ___________________________ 
Professional Education ____________
Graduate GPA: __________________ __________

WRITE the scores achieved for the following assessment as prescribed by the Virginia Board of Education: Praxis I or Praxis Core or equivalent approved scores, Praxis II, RVE (if required for your program), and VCLA. If an assessment has not been completed, WRITE the specific date you plan to take it.

Test Registration Centers and Dates Virginia Test Requirements
VCLA __________ Date you plan to take it ________________
RVE _________ Date you plan to take it ________________
Praxis Subject Assessment (formerly Praxis II) ________ Date you plan to take it ________________
Elementary Education Multiple Subjects:
Reading & Languages Date you plan to take it ________________
Mathematics Date you plan to take it ________________
Social Studies Date you plan to take it ________________
Science Date you plan to take it ________________
Praxis Core/Praxis I/Equivalent: Reading Writing
Mathematics Composite

Submit certificates to csmitth@odu.edu
Child Abuse and Neglect □ First Aid/CPR/AED □
Dyslexia Awareness Training □
Clearance Process □ If you have not completed this process attach all the forms for the clearance process

Foreign Language Teacher Candidates must have:
ACTFL-OPI rating of advanced-low or higher score:
MOS Specialist Exam for Marketing and Technical Education: ________________

ALL passing scores and completion of First Aid/CPR/AED and the Clearance Process must be on file prior to the Orientation Meeting date as noted on the cover letter above.

List ALL courses remaining/in progress to complete the degree/licensure requirements, and identify the semester of enrollment. These courses must be successfully completed prior to the Orientation Meeting for the teacher candidate internship. Please contact the OCE office if you plan to withdraw at any time, (757) 683-3348.

<table>
<thead>
<tr>
<th>COURSE</th>
<th>SEMESTER</th>
<th>COURSE</th>
<th>SEMESTER</th>
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<tr>
<td>1.</td>
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<td>2.</td>
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<td>3.</td>
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<td>8.</td>
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<td>4.</td>
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<td>9.</td>
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<td>5.</td>
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<td>10.</td>
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</tbody>
</table>

Master’s Degree Students COMPREHENSIVE EXAM:
Register 30 days in advance, not later than:
Date of Comprehensive Exam: FALL _______ SPRING _______ SUMMER _______

Students not enrolled the semester in which the Comprehensive Exam is taken, then, they must register for 999, 1cr, assigned by your academic department. For more information regarding the comprehensive exam, visit your academic department’s website. For Pk-3, Pk-6, 6-8, and 6-12 the registration is TLED 999, 1 credit.

Are there any major content or professional education courses with a grade below C- or C or C+ or B- or B, depending on your program? If so, what is the course and what is the plan for retaking the course before the Teacher Candidate Internship?

The Professional Portfolio must be completed and submitted during the teacher candidate internship semester. This requirement must be completed in order to receive a Passing grade for the internship. FMI on the electronic portfolio, go to: http://c1.livetext.com as prescribed by your program.

I, ____________________________ (print your name) have read the cover letter and understand that I must attend the two and a half-day Orientation, in order to be approved for student teaching.

Signature of Teacher Candidate ____________________________ Date ________________

Anticipating the successful completion of the current semester and the above plan, I recommend this candidate for the Teacher Candidate Internship.
AUTHORIZATION FOR RELEASE OF DISCIPLINARY RECORDS

Section I. To be completed by the Student

Name (print): _______________________________________________________________________

LAST     FIRST     MI

UIN: ____________________________________________________________________________

I hereby authorize the Director of Student Conduct & Academic Integrity, or designee, to release to the Associate Director of the Office of Clinical Experiences, or designee, any information contained in my student records (including copies of the records themselves) which is necessary to respond to Section II below. I understand that the information contained therein is confidential and will not be released to a third party.

Signature _____________________________________           Date ________________________

Do not write below this section.

TO:  Director of Student Conduct & Academic Integrity

FROM:  Associate Director, Office of Clinical Experiences

The above named student is applying to the Darden College of Education and Professional Studies to perform his/her student teaching requirement. If the student was ever subject to disciplinary action while enrolled as a student, please describe briefly, attach pertinent supporting information, and return this form to the Office of Clinical Experiences, Education Building, Suite 2345. Thank you.

Section II. To be completed by the Director of Student Conduct & Academic Integrity or designee

Summary of Disciplinary Action: ________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

Signature ____________________________ Date _____________________________

(person completing form)