



# YORK COLLEGE OF PENNSYLVANIA

## INTERNSHIP IN EDUCATIONAL LEADERSHIP

### *Administrative Internship Application*

I am applying to enroll in the following: (check the internship experience you are selecting)

\_\_\_\_\_ MED 594 Administrative Internship (one-semester; 3 credits)

\_\_\_\_\_ MED 595 Administrative Internship I and MED 596 Administrative Internship II  
(two-semesters - 4 credits)

Check the term(s) during which you wish to conduct your Administrative Internship:

\_\_\_\_Fall    \_\_\_\_Spring    \_\_\_\_Summer Semester    Academic Year \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: \_\_\_\_\_

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School District:

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_

Position: \_\_\_\_\_ Years in Current Position: \_\_\_\_\_

Total Years Teaching Experience: \_\_\_\_\_

Total Number of Years Working in Pennsylvania Schools under a Pennsylvania Certificate: \_\_\_\_\_

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Your Internship Supervising Principal: \_\_\_\_\_

Years Experience in District: \_\_\_\_\_ Years as Administrator: \_\_\_\_\_ Years in Education: \_\_\_\_\_

Degree(s) Held: \_\_\_\_\_ Certificates Held: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

M.Ed. Program Mentor: \_\_\_\_\_

Have you discussed your internship experience with both your supervising principal and mentor?

\_\_\_\_\_ Yes: date(s) SP: \_\_\_\_\_ Mentor: \_\_\_\_\_ No \_\_\_\_\_

Semester of Expected M.Ed. program Completion: \_\_\_\_\_

Semester of Expected Graduation: Fall Spring Summer 200\_\_

I plan to take the *Administration and Supervision PRAXIS* (0410) on: \_\_\_\_\_

List the MED courses you have completed and the grades you have earned thus far in the program:

COURSE	GRADE	COURSE	GRADE
		Other - Specify	

Master's GPA: \_\_\_\_\_ Advisor's Signature \_\_\_\_\_

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date