University of Arkansas
College of Education and Health Professions
Evaluation for Early Childhood Internship

DUE TO THE COORDINATOR OF TEACHER EDUCATION, PEABODY HALL RM 117,
BY OCTOBER 1st PRIOR TO INTERNSHIP

Please type or print

Name: _____ Student ID #: _____

Address:_____
Street address City State Zip

E-mail: _____ Phone: _____

Are you currently a recipient of a Uof A scholarship? ___yes ___no Name of Scholarship: _____

Expected date of undergraduate graduation: _____

If you have already completed a Bachelor's degree please answer the following questions:

If you answer no to any of the following 3 questions, contact the Pre-MAT transcript evaluator at 479.575.4209 immediately

1. Have you been admitted to the University of Arkansas as a non-degree seeking Pre-MAT student? ___ yes ___ no
2. Have you received a Pre-MAT transcript evaluation from CIED in Peabody 215? ___ yes ___no
3. Bachelor's degree cumulative GPA (check with the Graduate School for current G.P.A. Requirements): _____

Initial Licensure Area:

_____ Early Childhood Education, P-4

I understand that all requirements listed below must be met. I must notify the Coordinator of Teacher Education of the successful completion of these requirements. Failure to do so will prohibit or delay me from being placed in a school/district for the internship. Further, I understand that satisfactory completion of the Evaluation for Internship does not guarantee admission to the Master of Arts in Teaching (MAT) degree program. MAT degree applicants must be admitted to Graduate School and the program area.

_____
Student's signature date

Section II. Internship Requirements (To be checked by the Coordinator of Teacher Education)

1. Current UA cumulative GPA _____ *(Please check with Graduate School for the required GPA for an automatic admit to Graduate School)*

2. Met minimum Praxis I scores: □ Reading _____ □ Writing_____□ Math_____

Highlighted items are those requirements not yet met. The student is responsible for submitting documentation of completion of highlighted items. Once completed, the student will be cleared for internship.

Student Has Been Screened For Internship

_____
Coordinator of Teacher Education date

Section III. Internship Clearance

The student has presented proof of completion of the above items and has been admitted to Graduate School and the MAT program area.

_____
Coordinator of Teacher Education date

Rev. 09/08