Department of Teacher Education

INTERNSHIP YEAR DECLARATION FORM

Return this form to 134 Erickson Hall.

Name___________________________________________________________________

PID_________________________ Team #_______ Email________________________

Local address____________________________________________________________

_______________________________________________________________________

Phone_______________________________________________________________

Are you a special education major?______yes ______no

Are you a Music major? ______yes ______no  Are you an ASC major?_______yes_______no

Year you intend to intern________________________________________________

If you do not intend to intern in 2004-05, please check one of the reasons below:

_______ academic extension (e.g. need to finish teacher education coursework, major/minor courses, or degree requirements, study abroad, program interruption)

_______ personal reasons (e.g. financial needs, travel, personal preference, etc.)

I understand that if I need to change the internship year that I have declared on this form, that I must apply for a change in internship year. I understand that the process for applying for a change in internship year involves completing an application form and having my request reviewed by the Teacher Education Department. I understand that approval of my request will depend on the rationale provided and whether there is space available in the internship year cohort I request. If there is not space available, I will be assigned to the next available year.

Requests to change internship year declarations should be submitted to the College of Education Student Affairs Office, 134 Erickson Hall, as soon as you determine that you need to change your internship year but by no later than December 1 of the year preceding your initial declaration year.

The Request to Change Internship Year Form is found at the following website:
http://ed-web3.educ.msu.edu/infostu/teforms.htm

My signature below confirms that I have read and understood the process presented above.

______________________________________________    ________________________
Student’s signature Date