ASTATE CLINICAL EXPERIENCE PRE-TEACHER INTERN CHECK FORM

Secondary 7-12 and K-12 Majors and Program of Study

Candidate: Major Area: POS Current Phone #: ASU E-Mail Address	Grade level		7.12			
Current Phone #:	Grade level	K-12	7 12	G 1 17		
			7-12	Catalog Year:		
ASU E-Mail Address		A	dvisor:			
This is a checkpoint that includes the prerbeen implemented to assist you in determidentified at this point can possibly be elimented to assist your indetermination of the prerbeen includes the prerbeen implemented to assist you in determination of the prerbeen implemented to assist you in determination of the prerbeen implemented to assist you in determination of the prerbeen implemented to assist you in determination of the prerbeen implemented to assist you in determination of the prerbeen implemented to assist you in determination of the prerbeen implemented to assist you in determination of the prerbeen implemented to assist you in determination of the prerbeen implemented to assist your indicates the prerbeen indicates the p	ining your eligib	oility for	the teach	ing internship. l	Deficiencies	3
Current Degree Evaluation must accon	npany this forn	n.				
I. Cumulative Degree Hours					Hours	GPA
Current Cumulative Degree Hours (POS)	list only Program of	Study hou	rs-must hav	re 3.0 GPA)		
Semester Hours of Current Enrollmen	t					
Semester hours enrolled in last semest	ter before capsto	one inter	nship	•		
Summer enrollment				•		
Total semester hours must equal 90 or	r more			•		
-				-		
. Major Requirements						
Hours completed in the major courses or POS:				Major or	POS GPA:	
List of major courses remaining: Form	nat – Semester:	Prefix a	and Num	lber		
Current Semester: Prefix & Number	Semester: Prefix	and Nun	nber	Semester; Prefix and Number		
List of general education or approved major Prefix and Number	courses remaining	g after ca	pstone into	ernship semester:	Format – Sei	nester:

III. List of Professional Education Courses Remaining:

Format - Semester: Prefix and Number

IV. <u>List of I</u>	Departmental and General Education Courses	Remaining Format – Semester: Prefix and Number
approved pe graduation.	dagogical assessment prior to graduation (Some n (See advisor for specifics.)	e state approved content assessment(s) and the state najors are required to take and pass both prior to red to have access to an iPad or iPad mini during their
	ernship for supervision/communication and access	
VII. I,		eet the minimum requirements for capstone teaching
1. 2. 3. 4. 5.	Completion of professional education courses an majors with the exception of the capstone teachin in the Professional Education courses including Psychology, and Adaptive PE.) Attainment of a minimum overall grade point ave 2.70 in the major area (Program of Study (POS) graduation. (However, all students admitted prictoverall and for the major area.) Completion of prescribed department requirement Completion of Intent application forms for the capstone teaching internship Attendance at the mandatory orientation session Verification of clearance of disqualifying offense	rs for undergraduates only filed with the Office of Professional Education Programs and major courses for secondary, K-12, and POS education and internship semester (Students must have a 'C' or better Exceptional Children in the Regular Classroom, Ed erage of 2.70 in all work taken and a grade point average of must have a 3.0.) This must be maintained through for to August 24, 2015 are required to maintain a 2.50 apstone teaching internship clinical experience eight weeks are the pre-registration date of the semester preceding
Undergradua Furthermore and if I do n I further university/co	ate Bulletin when the actual assignment for capsto , my advisor will complete an admission validatio ot meet all internship admission requirements, I m acknowledge that during the capstone internship	on form at the beginning of the capstone internship semester nust postpone my capstone teaching internship semester.
Accord classroom to	ing to the ADE policies governing programs for e	educator licensure (Rule 8.04), I must "before entering a edocumentation that my Child Maltreatment Central e been approved at the ADE, AELS Public Site.
Clinical	Experience Field II signature	Date
Advisor	's signature	Date

A copy is retained by the advisor, a copy by the student, and the original copy is to be submitted to the office of Professional Education Programs, Education Building, room 213.