

# Distance Internship Application

**Directions:** Please fill out this form completely and submit it to the Internship Coordinator.

## ***I. Intern Information***

Name of Intern: \_\_\_\_\_

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

Year Internship is to be done: \_\_\_\_\_

## ***II. Location of Internship***

State: \_\_\_\_\_ County/City: \_\_\_\_\_

School District: \_\_\_\_\_

School District Field Supervisor Name:

\_\_\_\_\_

Title: \_\_\_\_\_

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

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

Email: \_\_\_\_\_

- III. Please summarize the reasons why you are requesting a distance internship. Use the back of this form or attach information, as needed.**
- IV. Please note that the site to which you are applying must also provide in writing a plan for how they will meet the EDSP department's requirements for internship. Use page 36 of the School Psychology Handbook as a guide for site requirements.**
- V. Please provide documentation of the supervisor's qualifications as listed on page 36 as well.**