**Indiana State University**

**Bayh College of Education**

**Department of Educational Leadership**

Central Office Internship Application

I am applying for the Central Office Internship Program for Summer

Date

Name

Address City State Zip

Phone: Home Cell School

Email Address

School District City County

School Building Name

School Address City State Zip

|  |  |  |
| --- | --- | --- |
| *Universities Attended* | *Dates* | *Degrees Earned* |
|  |  |  |
|  |  |  |
|  |  |  |

Administrative/Teaching Experience

|  |  |  |
| --- | --- | --- |
| *District* | *Dates* | *Duties/Assignments* |
|  |  |  |
|  |  |  |
|  |  |  |

Which principal’s licensure do you hold? Secondary Elementary K-12

Internship

District in which you will intern

Name of district supervisor Title

Have arrangements been made to schedule time for completing the internship this summer?

Mail or email application to: Dr. Terry McDaniel, Program Coordinator

Department of Educational Leadership

Indiana State University

Bayh College of Education, Room UH 211G

Terre Haute, IN 47809

[tmcdaniel@indstate.edu](mailto:tmcdaniel@indstate.edu)

**Indiana State University**

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Superintendent’s Authorization Form

Intern Candidate

School District

The above named individual has applied to complete the Superintendent/District-Level Administrative Internship at Indiana State University. Our desire is to produce the educators with the greatest potential for educational leadership at the district level, so we ask you to carefully evaluate the candidate.

**Please circle the number that best indicates your judgment of the applicant.**

|  |  |
| --- | --- |
|  | **Very Poor Poor Fair Good Very Good** |
| **Takes the initiative** | **1 2 3 4 5** |
| **Is innovative and creative** | **1 2 3 4 5** |
| **Is sensitive to the needs of others** | **1 2 3 4 5** |
| **Assumes responsibilities** | **1 2 3 4 5** |
| **Works well with others** | **1 2 3 4 5** |
| **Demonstrates leadership ability** | **1 2 3 4 5** |
| **Shows tact** | **1 2 3 4 5** |
| **Has a positive growth mindset** | **1 2 3 4 5** |
| **Can organize plans and people** | **1 2 3 4 5** |
| **Completes tasks that are started** | **1 2 3 4 5** |
| **Visionary** | **1 2 3 4 5** |
| **Communication skills** | **1 2 3 4 5** |

On a scale below circle the number that best represents your total impressions on the applicant with respect to his/her potential to succeed as a superintendent/district-level leader.

(LOW) 1 2 3 4 5 6 7 8 9 10 (HIGH)

1. The intern will be responsible for 120 hours of district-level experience (60 hours if serving as an intern of the Director of Exceptional Needs program). This includes any activity related to district level responsibilities.
2. The intern will be completing activities connected to each of the Indiana district-level standards for administrators.
3. The intern will be responsible for coordinating with you, a long-term project that is valuable to the district as well as to the intern. This project will be mutually agreeable with you and the intern. The intern and you as the field supervisor will complete the internship evaluation form (available in the syllabus for EDLR 790/792). The assessment will rate the intern’s performance in each of the Educational Leadership Constituencies Council (ELCC) standards.
4. The intern will be responsible for submitting all assignments (listed above) to the university supervisor.

Your signature indicates agreement to authorize the applicant to intern with you at your school district and your willingness to participate in this experience.

Date Signature Title