

INTERN COORDINATOR CONFIRMATION

(To be completed by the clinical coordinator supporting interns)

Name of Candidate: _____ Student ID: _____

Program:

- Multiple Subject
- Single Subject: Content Area _____
- Education Specialist: Focus _____

Teaching Position Content Area: _____ Grade Level(s): _____

School Site: _____ District: _____

Principal Name: _____ Principal Email: _____

Background: Prior to applying for an intern credential, candidates must meet with the clinical coordinator to review/confirm the following information:

- Candidate has completed the Basic Skills Requirement.
- Candidate has completed the Subject Matter Requirement.
- Teaching position matches the credential objective that the candidate is pursuing through the program indicated above.
- If teaching in a bilingual setting, candidate has obtained a letter from the BILA Coordinator.
- CSUDH has an executed Intern MOU on file with the employing district or an MOU will be executed before the candidate is recommended for the intern credential.
- School site is within 15 miles of CSUDH or the candidate has confirmed that the distance will not inhibit their ability to attend required courses on campus. School site miles from CSUDH: _____
- Candidate understands that the intern credential expires after two years.
- Candidate understands that a change of restriction must be completed if the employing district changes.
- Candidate understands that the intern credential must be canceled if they are no longer enrolled in CSUDH courses.
- Candidate understands that the CalTPA must be completed while teaching within this position to earn a preliminary credential.*
- Multiple Subject and Education Specialist candidates understand that they must complete the RICA to earn a preliminary credential.*
- Candidate understands that every semester that they are employed under the intern credential, they must be enrolled in a course that provides university supervision. *If candidates do not complete assessments to earn a preliminary credential, they must continue to enroll in a supervision course to maintain employment.
- Candidate understands that when entering the intern option, the completion of the credential program becomes dependent upon maintaining employment.

Signature of Intern Coordinator: _____ Date: _____

Print Name of Intern Coordinator: _____

Candidate Signature: _____ Date: _____