

Howard University
Department of Educational Administration and Policy
Administrative Internship Application
(Due by mid-semester of the semester prior to the Internship)

Semester of Planned Internship _____ Year _____

PART I

Name _____

Address _____
(Street or P.O. Box) (City) (State) (Zip code)

Preferred personal phone # _____ Work # _____

Fax # _____ Email address _____

Area of Administrative/Supervisory Concentration (Check appropriate area(s):

- ____ Elementary School
- ____ Middle School
- ____ High School
- ____ District or Central Office
- ____ Educational Organization
- ____ Higher Education
- ____ Other (Specify) _____

Preference of school, school district or other location, including the name of the prospective field supervisor, address, telephone and any other contact information.

PART II

1. **Please confirm all the prerequisite courses that you have successfully completed by attaching a copy of your transcript.**

2. **Please list all courses in which you are currently enrolled:**

<u>Name of Course</u>	<u>Course #</u>	<u>Instructor</u>

PART III

1. **Rate yourself in the following areas on a scale of 1-10, with 10 as the highest:**

<input type="text"/> Reading skills	<input type="text"/> Writing skills
<input type="text"/> Perceptual skills	<input type="text"/> Human relations skills
<input type="text"/> Analytical skills	<input type="text"/> Technological skills
<input type="text"/> Budgetary skills	<input type="text"/> Overall content knowledge

2. **What do you consider the strongest attributes that you bring to the internship?**

3. What area(s) of your administrative skills would you like to further develop?

Signed _____
(Intern) *(Date)*

Approved for Placement _____
(Faculty Advisor) *(Date)*

Approved for Placement _____
(Department Chair) *(Date)*

Name of Department Internship Coordinator _____

Comments: