

INTERN CANDIDATE INFORMATION FORM

Deadline for submitting Intern Candidate Information Form: January 10.

Submit this application to UCI, Dept. of Education. **Your one page resume and a photo copy of your transcripts must be enclosed with this form.** Program begins Spring Quarter (Last week of March).

DATE: _____

Credential Objective (Check One): Multiple Subject _____ Single Subject _____

This form, along with your resume and a copy of your transcripts will be reproduced and distributed to the school district representatives who conduct the interviews. **Please type or print clearly.**

Name: _____

Current Address			Permanent Address		
City	State	Zip	City	State	Zip

(Area Code) _____ Home Phone No. _____ Alt. Phone No. _____

(Area Code) _____ Work Phone No. _____ E-Mail _____

PLEASE ANSWER THE FOLLOWING:

- I hold (or will receive) a bachelor's degree in: Major _____
Minor _____
University/College Year _____
- List any education courses, by number and title, that you have taken:

- Do you speak a language other than English? Yes _____ No _____
If yes, what language? _____ How fluent? _____
- Have you passed the CBEST? Yes _____ No _____
Are you registered to take CBEST? Yes _____ No _____ Registered Date: _____
- If you are a multiple subject candidate, what grade level do you prefer? _____ N/A
- If you are a single subject candidate, in what subject area do you want to teach? _____
- Please check the appropriate subject matter examination that you have taken and passed and list the date of the exam. _____ CSET.
 - If you have not yet taken the appropriate exam listed in 7a, are you registered to take the next available subject matter examination? Yes _____ No _____ Registered Date: _____
 - If you are not taking the exam, did you complete a subject matter preparation program? Yes _____ No _____ in what area: _____ at what University: _____
- Attach a resume, highlighting your experiences with children and other relevant training and work experience.
- I have attended an **Intern** Program Information Session: Yes _____ No _____
Please give the approximate date of the Information Session that you attended: _____

Signature of the Applicant _____