**Application for the ECE Yearlong Clinical II, 7 Weeks Abroad**

Please complete **ALL** items (type), and send completed application form to:

Dr. Amanda Richey, arichey1@kennesaw.edu

Kennesaw Hall, Rm 3020

Bagwell College of Education

Kennesaw State University

## Kennesaw, GA 30144

I. PERSONAL INFORMATION: (Please list name as it appears on passport/identification)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name First/Middle

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 Street Address City/State/Zip Code

(\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Telephone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date of Birth (mo/day/yr) Gender (M/F) Student ID Number

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

II. EMERGENCY CONTACTS: List two.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address Address

(\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Telephone # Relationship Telephone # Relationship

**If emergency contacts are not your parents may we speak to your parents about the program: yes \_\_\_ no \_\_\_**

III. PASSPORT INFORMATION

Country of Citizenship \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_ YES, I have a passport, No#.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City Issued\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date \_\_\_\_\_\_

\_\_\_\_ NO, I am applying for a passport; **ALL STUDENTS MUST HAVE A PASSPORT**

**PLEASE SUBMIT A COPY AS SOON AS OBTAINED**

V. ACADEMIC INFORMATION

Accepted to Teacher Education Program/College of Education: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passed GACE I: \_\_\_\_\_\_\_\_\_\_\_\_\_ Passed GACE II: \_\_\_\_\_\_\_\_\_\_\_\_\_ (If not yet taken, date you plan to take it)

Student Teaching Semester: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teaching Field: ( ) PK-5 ( ) Middle Grades (Content areas)

 \_\_\_\_\_\_\_\_\_\_\_\_ ( ) Secondary (Content area) \_\_\_\_\_\_\_\_\_\_\_\_( ) P-12 (Content area) \_\_\_\_\_\_\_\_\_\_\_\_ ( ) other

 G.P.A. \_\_\_\_\_\_\_\_\_\_\_\_

Please list degrees/certificates previously obtained with institution and date of completion:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

VI. TEACHING EXPERIENCE

Please provide grade level(s), subject(s), institution(s), and dates for all previous teaching experience:

Please list any coursework taken related to placement location history or culture. Also list any formal language courses or informal language study. Include where and for how long

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VII. CAREER OBJECTIVES/FUTURE GOALS

Please describe how International Student Teaching, would relate to your future goals or career objectives:

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IX. INTERNATIONAL EXPERIENCE

Please list any previous international/intercultural experience:

X. MEDICAL INFORMATION

**For certain medical conditions, you may be required to provide written consent from a physician or to demonstrate that you have sought a physician's advice about appropriate precautions to take on this program.** (If uncertain as to fitness for participation, be certain to consult your personal physician.) Supplemental health insurance is required for the program.

If you have medical conditions, please specify below:

# XI. PREFERENCES

Please state grade level choices for your placement. Please note: Your preference is not guaranteed.

XII. CHOICE OF HOST COUNTRIES:

First choice of host country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Would you be open to going abroad to Ecuador or Costa Rica as your second choice if your first choice host country is filled? Yes/No

XIII. HOUSING PREFERENCE

Host Family \_\_\_\_\_\_\_\_\_

Apartment \_\_\_\_\_\_\_\_\_

Other (Please Specify) \_\_\_\_\_

IV. ECE – As part of this experience we expect candidates to conduct a project. This could relate to curriculum or teaching comparison, supporting ELLs, enhancing global competencies, etc. You will receive mentorship from your ECE faculty supervisor, and the project will be presented at the re-entry seminar upon your return to KSU. Please use the attached template at the end of this application to draft out your proposal. Note that this is just a draft idea and it may change later on.

IV. ADDITIONAL MATERIALS REQUIRED

 a.) Two recommendation forms from ECE faculty

 b.) Copy of transcripts

 c.) Resume

 d.) Copy of Passport

**I certify that all the above information is true and correct to the best of my knowledge. I have read, understand, and fully accept all of the above terms for participation in the Student Teaching International Study Abroad program sponsored by Kennesaw State University.**

 X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Applicant Date Signed

**The evaluation process for the applicants consists of the following steps…**

1. **The candidate has submitted all application materials by the due date of October 1st, 2018 at 5 p.m.**
2. **The candidate has an overall GPA of 3.0.**
3. **Professional dispositions will be evaluated as part of the selection process.**

**ECE Yearlong Clinical II Experience in Ecuador or Costa Rica Final Project**

**Title of Project:**

**Brief description of project (50 words):**

**Major Goals and Objectives for the project (50 words):**

**What is the proposed impact for the Host School? Your local community? (50 words)**

**Timeline for completion:**