

LICENSURE ELIGIBILITY CONFIRMATION:

- 1. Have you ever been convicted of a Felony in the US or US Territories or found guilty of a criminal offense in another country? YES/ NO
- 2. Have you ever been found guilty of a misdemeanor involving children or drugs? YES/ NO
- 3. Have you ever had a teaching certificate or license denied, revoked, cancelled or suspended? YES/ NO

ATTACHMENTS:

- 1. AUTOBIOGRAPHICAL SKETCH: Attach THREE typed copies of a one page essay. List your Full Name and Title: "Autobiographical Sketch" at the top of the page. Answer the question: "Why have you chosen art education as your future profession?"
- 2. SCORE REPORTS: Attach a copy of your passing scores on either SAT, ACT or PRAXIS I exams. Attach passing scores on Praxis II: Art Content Knowledge.
- 3. TUBERCULOSIS SCREENING: Attach an up to date TB Screen- Student Health Services (828-8828)
- 4. SCHOOL DIVISION EMPLOYMENT: Attach proof of any current employment within a school division
- 5. UNOFFICIAL TRANSCRIPTS: Attach a copy of your most recent eservices transcript, your application **will not** be reviewed unless attached.
- 6. OTHER TRANSCRIPTS: If you received a degree from another institution, **three** photocopies of these transcripts are required with your application.
- 7. SPECIAL REQUESTS/ PHYSICAL LIMITATIONS: Attach an explanation describing limitations and accommodations that you may require during your clinical internship such as but not limited to: Physical limitations, Anticipated absence due to pregnancy, surgery, other serious circumstances (include dates for these events that will affect your placement) and travel or location needs. Your advisor, Department Chair and the Associate Dean of the School of Education, must approve all special requests. Any time missed from the internship must be made up in its entirety.

Note: Placements are often not confirmed until the first week of student teaching. Students will be notified through mail by the School of Education where they are placed. Placements are **not** made through the Department of Art Education. Placements cannot be changed once they are confirmed. Questions: Sarah Branigan, (804) 828-1996 or sbranigan@vcu.edu

COURSE REGISTRATION:

- ARTE 404: Student Teaching Seminar
- TEDU 485: Student Teaching in Art
- TEDU 486: Student Teaching in Art

STUDENT SIGNATURE: _____ DATE: _____

ADVISOR CERTIFICATION:

-I have reviewed the record of this applicant, including any extenuating circumstances or requests to ensure that all of the prerequisites for student teaching have been satisfied in accordance with catalogue requirements. And this applicant is recommended for the program in **PreK- 12 Art.**
 -If the applicant is conditionally recommended for the program, the conditions are as follows:

 Signature of Administrative Director, Department of Art Education

 Date

PLACE ALL MATERIALS IN A SEALED ENVELOPE

MAIL TO:
 Department of Art Education
 Attn: Sarah Branigan
 PO BOX 843084
 Richmond, VA 23234

HAND DELIVER TO:
 Franklin Street Gym
 Room 134

ALL APPLICATIONS ARE REVIEWED AND THEN FORWARDED TO: School of Education, Student Services.