



Lurie College of Education

Date: \_\_\_\_\_

SAN JOSÉ STATE UNIVERSITY

Department of Counselor Education

Application for School Counseling Internship Credential Program

Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
(Last) (First) (MI)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone: \_\_\_\_\_  
(Home) (Mobile) (Work)

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

### INTERNSHIP PLACEMENT

School District: \_\_\_\_\_

School: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

County: \_\_\_\_\_

Superintendent or Designee: \_\_\_\_\_  
(Signature) (Date)

Field-Site School Administrator: \_\_\_\_\_  
(Signature) (Date)

District Supervisor: \_\_\_\_\_  
(Signature) (Date)

School Union Representative: \_\_\_\_\_  
(Signature) (Date)

Intern Counselor: \_\_\_\_\_  
(Signature) (Date)

University Advisor: \_\_\_\_\_  
(Signature) (Date)

Counselor Edu. Prerequisite Courses (or equivalent experience)	Date Completed	Dated to be Completed	Grade
EDCO _____	_____	_____	_____
EDCO _____	_____	_____	_____
EDCO _____	_____	_____	_____
EDCO _____	_____	_____	_____
Total units needed to be completed _____		Date to be completed _____	

Internship Counselor is required register for EDCO 292 every semester while in program.