

**San Jose State University  
Department of Special Education**

**Education Specialist Credential Program**

**Collaborative Intern Program**

**Check One:**

- Mild to Moderate Credential Program
- Moderate to Severe Credential Program
- Early Childhood Special Education

**Check One:**

- Preliminary
- Level I

**INTERN AGREEMENT FORM**

**Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**Phone: (H)** \_\_\_\_\_ **Phone (W)** \_\_\_\_\_

**Email:** \_\_\_\_\_ **SS#** \_\_\_\_\_

**Check one:**  **District** (please specify): \_\_\_\_\_  **Charter School**  
 **Non-Public School (NPS)**  **Other**  
 **County Office of Education (COE)** (please specify): \_\_\_\_\_

**School or NPS Name:** \_\_\_\_\_

**NPS Code:** \_\_\_\_\_ **NPS District:** \_\_\_\_\_

**This Internship Credential will be effective as of:** \_\_\_\_\_

The applicant must be enrolled in coursework during the semester in which the Intern Program begins.

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This applicant has conferred with Intern Coordinator concerning his/her qualifications for acceptance to the Intern Program at San Jose State University.

The prerequisite requirements have been met and the Intern candidate has obtained employment in your district.

**University:**

1. The Department will provide the Intern with coursework leading to the appropriate teaching credential in special education.
2. The Department of Special Education will supervise and provide support to the Intern in the courses EDSE 105 (in the first semester of the program) in EDSE 105X and in the directed teaching course (in the fourth or last semester in the program).
3. The Department will provide a University Advisor during the extent of the internship.
4. The Department of Special Education will develop an Induction Plan with the Intern and the District of Employment, NPS or the County Office of Education in the first semester of the internship program.

**Intern Candidate:**

The Intern Candidate agrees to take classes each semester as per the Roadmap and Plan, maintain a 3.0 GPA (University Policy), and earn a B or better in every class (Department Policy). The program needs to be completed within the credential time frame (2 years).

\_\_\_\_\_  
Intern Signature Date

\_\_\_\_\_  
Please print name

**District of Employment, NPS or County Office of Education:**

Please read the following and sign below if you accept the terms of this agreement:

1. The intern has been assigned to a special education teaching position appropriate to the credential sought. Employment of the intern does not displace a certificated employee in my district.
2. A Support Provider identified by the principal or administrator will be assigned to assist the Intern during the first semester of the internship. The Support Provider should hold the same credential as the Intern’s program.

Name of Support Provider: \_\_\_\_\_ Email: \_\_\_\_\_

3. The District, NPS or COE agrees to pay the Intern full salary for a first year teacher during the internship.

On behalf of the District of Employment, NPS or County Office of Education, I have reviewed the above requirements and accept the terms of this agreement.

\_\_\_\_\_  
Director of Special Education Date

\_\_\_\_\_  
Please print name

\_\_\_\_\_  
District Superintendent Date

\_\_\_\_\_  
Please print name

\_\_\_\_\_  
Dr. Chris Hagie Date  
Intern Program Coordinator

THE INTERN MUST RETURN THIS FORM **IN PERSON** TO THE DEPARTMENT OF SPECIAL EDUCATION in SWEENEY HALL 204 at SAN JOSE STATE UNIVERSITY. A copy will be made for the Intern’s file. The applicant will then take this form with the Intern Credential Application to the SJSU Credential Office in Sweeney Hall 107.