



Northampton Community College
Northampton Community College
Early Childhood Education: Infant to Grade 4

Internship Request Form

The Internship Request Form must be completed prior to registering for Internship
**All Internship Placements must be arranged, completed and cleared through the
Early Childhood Department**

**Internships will be in Birth to Kindergarten Classrooms.
Internship requires a C or higher in all ECE courses.**

*Please submit this request form and your *program audit as attached files to
emaciborski@northampton.edu*

Name: _____

Address: _____

Phone: _____

Email: _____

I am enrolled at ___ Bethlehem ___ Monroe ___ On Line (6 or more ECE courses -18 credits - were completed online)

I am requesting Internship for: _____ Semester _____ Year

I request placement with ___ Infants ___ Toddlers ___ Preschool ___ Kindergarten ___ Head Start

City of Preference _____

Transportation Challenges: Please describe _____

I expect to graduate in ___ Spring ___ Winter _____ Year

I expect to receive ___ Associate degree ___ Certificate

Upon graduation from NCC I plan to:

___ Teach infant to preschool

___ Transfer to bachelor degree program for Pre-K Certification ___ Full time ___ Part time

If transferring: Intended college(s) _____

Praxis: Passed _____ Retaking: date _____ Plan on taking: date _____

* Directions: Copy the audit, put in Word document, and attach to the same email as the Internship Request form.

The following is required only if requesting a specific site

Requesting an Internship Placement Location

You may request an internship site. All Internship preschool centers are expected to be **enrolled in a state sponsored Quality Assurance Rating program and/or accredited**. If you are employed at the site, you must be considered a full time employee and have worked there for six months or more. In addition, the qualifications of the cooperating teacher must meet the Quality Assurance lead teacher requirements for the state.

A request **does not mean** that you will be placed at this site.

I request: Name of School/Center: _____

If in PA: Site is a PA STAR Level ___1___2___3___4___Accredited (NAEYC or MSCES)

If in state other than PA: Site meets the quality standards in _____ (name of state) at the _____quality level. ___State does not have a Quality Assurance Rating program

Reason for request: ___employment ___transportation ___other (describe) _____

If employed: ___number of hours per week ___years working at the school/center (minimum 6 months)

Please complete:

Address: _____

Phone: _____

Director: _____

Director Email: _____

Cooperating Teacher: _____

Cooperating Teacher Email: _____

Cooperating Teacher Qualifications: _____Degree _____Years Teaching

Age Group: ___Infants ___Toddlers ___Preschool ___Kindergarten