

Application for Graduate Internship

DATE: _____

Please check one: Post-Baccalaureate Student Application

MAT Student Application

Please check one: Deficiency Plan

Master's Degree

Name _____ Student Identification Number _____

Email _____

Address (Local) _____

_____ (_____) _____
City State Zip Code Phone No.

Alternate (Home) _____

_____ (_____) _____
City State Zip Code Phone No.

Area of Certification: _____

Date of Admission to TWU: _____

Attach the following to this application:

Copy of letter of admission into Texas Woman's University's Graduate School

Verification of Content Area Mastery

1. Copy of TExES score or 2. Verification of a minimum of 24 semester credit hours in the content area if a TExES/ExCET exam is not available

Unofficial Degree Plan or a copy of Deficiency Plan for non-MAT students

Submit the completed application to the Professional Development Center, SH 202F