**FIELDWORK APPLICATION**

This form may be downloaded at [www.csun.edu/education/elps](http://www.csun.edu/education/elps)

Complete all information requested and forward two copies to: Department Chair, Educational Leadership and Policy Studies, CSU Northridge, 18111 Nordhoff Street, Northridge, CA 91330-8265.

* Students enrolling for fieldwork in the **Fall semester** **must submit their application by June 15**
* Students enrolling for fieldwork in the **Spring semester** **must submit this application by December 15**

**Note:** This is not an application for registration into ELPS 688, Fieldwork. Students must register on the Web Portal for the course. **You may only take ELPS 688, Fieldwork if you have 6 hours or less of coursework remaining in the program.**

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| Name of cohort you attend: | | | | | | | | | | | | | | |  | | | | | | If not in a cohort, are you an on-campus student? | | | | | | | | | | | | | | | | | | | | Yes | | |  | | No |  |
| Semester in which fieldwork will take place: | | | | | | | | | | | | | | | | | | | | | | | | | | Spring | | |  | | Fall | | |  | | | | | Year | | | | | | 200\_\_\_ | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Last Name:** | | | | | |  | | | | | | | | | | | **First Name:** | | | | | | |  | | | | **M.I.** | |  | | | **CSUN Student ID#:** | | | | | | | | | |  | | | | |
| **PERSONAL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Contact Information** | | | | | | | | | | | | | | | | | | | | | | | | | | **Degrees and Experience** | | | | | | | | | | | | | | | | | | | | | |
| Home Address: | | | | | | | | |  | | | | | | | | | | | | | | | | | Master’s Year: | | | | | |  | | | School: | | | | |  | | | | | | | |
| City: | |  | | | | | | | | | State: | | | | |  | | Zip: | | | |  | | | | Bachelor’s Year: | | | | | |  | | | School: | | | | |  | | | | | | | |
| Home Phone: | | | | | | |  | | | | | |  | | | |  | | | | | | | | | Number of years teaching: | | | | | | | | | | | | | |  | | | | | | | |
| Cell Phone: | | | | | | |  | | | | | |  | | | |  | | | | | | | | | Number of years at present school: | | | | | | | | | | | | | |  | | | | | | | |
| Email: | | |  | | | | | | | | | | | | | | | | | | | | | | | Present Position: (grade and/or subject) | | | | | | | | | | |  | | | | | | | | | | |
| **FIELDWORK DETAILS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Site Information** | | | | | | | | | | | | | | | | | | | | | | | | | | **Supervisor Information** | | | | | | | | | | | | | | | | | | | | | |
| School District: | | | | | | | | | |  | | | | | | | | | | | | | | | | Name on-site supervisor: | | | | | | | | | |  | | | | | | | | | | | |
| Site Name: | | | | | | | | | |  | | | | | | | | | | | | | | | | Title: |  | | | | | | | | | | | | | | | | | | | | |
| Address: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City: | | |  | | | | | | | | | State: | | | | |  | | Zip: | | | |  | | | Email: | |  | | | | | | | | | | | | | | | | | | | |
| Phone: | | | |  | | | |  | | | | | |  | | | Ext: | | |  | | | | | | Phone: | |  | | |  | | |  | | | | Ext: | | | |  | | | | | |
| Time of day you will do Fieldwork: [e.g. 7:30-8:30, 3-5:00] | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **Requirements for admittance into ELPS 688, Fieldwork**  **[Check all requirements that have been completed]** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Student has been accepted into the Preliminary Administrative Services Credential Program (if interested in receiving an Administrative Credential) [contact Credential Office for more information 818-677-2586 or [www.csun.edu/education/cred](http://www.csun.edu/education/cred)] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Student is Formally Classified in ELPS program [contact ELPS Department Office for more information 818-677-2591 or [www.csun.edu/education/elps](http://www.csun.edu/education/elps)] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Student has completed twenty-four [24] semester hours or more of program course work | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**FIELDWORK AGREEMENT**

I agree to sponsor and direct the fieldwork experience in Educational Administration of the above named credential candidate. So far as possible I agree to provide for the types of experiences described in the Fieldwork Activities list.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| On-site supervisor: |  | Signature: |  | Date: |  |
| Student: |  | Signature: |  | Date: |  |