****

**INTERNSHIP EXPERIENCE**

|  |  |
| --- | --- |
| NAME: | SEMESTER: |
| EMAIL: | PROFESSOR: |
| GRADUATION DATE: | COURSE: |
| AREA OF TEACHING INTEREST: (i.e. middle school music) | |
| * I have attended a TCA Orientation. * I have read the personnel/intern policies. * I have reviewed the information about TCA on the website. | |
| DESCRIPTION OF ACTIVITY: | |
| TIME REQUIRED: | |
| PERSONAL GOAL(S): | |
| COURSE GOAL(S): | |