



GOOSE CREEK CONSOLIDATED INDEPENDENT SCHOOL DISTRICT

GCCISD ADMINISTRATIVE/PROFESSIONAL INTERNSHIP INSTRUCTIONS AND EXPECTATIONS

Below are the requirements and expectations for Goose Creek CISD **in-district only** administrative/professional interns (all non-Goose Creek CISD internship applicants will be considered on an individual basis):

1. Approval for Placement

- a. Contact the Human Resources Department at **281-707-3539** to request a **GCCISD Request for Internship** form.
- b. Complete the request form and submit it to the Assistant Superintendent of Human Resources for approval.
- c. It may take up to 10 work days for your request to be processed. Once approved by the Human Resources Department, HR Directors will contact the appropriate department(s) and/or campuses.

2. Internship Guidelines

Please read and adhere to the following guidelines:

- a. Internships can start once all paperwork and verification has been completed by the HR Department.
- b. Interns will be required to wear their ID badge during their internship.
- c. Interns will need to respect the campus decisions in which they will be assigned.
- d. Internships will not be approved at any campus where their child is currently enrolled.
- e. Students' names and education records are confidential under the Texas Education Code and the Family Education Rights and Privacy Act. When accepted as a GCCISD intern, you must agree to abide by these laws and maintain the confidentiality of this information.
- f. Please adhere to the mentor's schedule regarding visits to individual classrooms during instructional time. Additional visits shall not be permitted if their duration or frequency interferes with the delivery of the instruction or disrupts the normal school environment.
- g. Be respectful of the campus' ultimate purpose of educating the students that attend the campus and serving the needs of those families. Assisting with an internship is not a focus to their main goal. Please be courteous to the campus assisting you.
- h. Requests for videotaping will not be permitted.
- i. The campus administrator and the HR Directors have the authority to deny or discontinue requests for internship.
- j. Internship activities/hours should occur outside of instructional time.

3. License Professional Hours for LPCs

- a. Individuals seeking LPC hours must request permission from the Deputy Superintendent of C&I and the Director of Guidance & Counseling for approval. Request must be supported by the university and hours may be earned during the employee's conference time or during non-instructional time. (written parent approval prior to ANY counseling and/or assessment will be required.)

If you need any additional information, please contact **281-707-3539**.



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**REQUEST FOR INTERNSHIP
ADMINISTRATIVE/PROFESSIONAL**

Internship Type: _____ Superintendent _____ Principal _____ Counselor _____ Educational Diagnostician

Other Certification/Licensure Sought: _____

Name: _____ Date: _____

Current Campus: _____ Current Position: _____

Address: _____ City: _____

Phone: _____ Email: _____

University: _____ Name of Internship Program: _____

Program Supervisor: _____ Phone: _____ Email: _____

Briefly Describe & Attach Program Requirements: _____

Campus Requested: _____ Total Hours Required: _____ Total Number of Weeks: _____

Requested Start Date: _____ Anticipated End Date: _____

Resume' Attached: Yes _____ No _____

Agree to Follow GCCISD Administrative/Professional Internship Instructions and Expectations: Yes: _____ No _____

Internship Agreement: (Counselors Only)

I _____, understand that as a counselor intern, I must: maintain confidentiality, professionalism, report to CPS any student who may express harm to himself /others, have a counselor mentor present for all individual and group sessions, not conduct outside counseling representing self as a Goose Creek CISD employee, and not prescribe medication, or give formal medical diagnosis or remediation.

Signature of Intern

Date of Request

Signature of Program Director

Date Approved

For Internal Use Only:	
<input type="checkbox"/> GC Personnel Notified	Assignment: _____
<input type="checkbox"/> _____ Director <input type="checkbox"/> Principal	Campus: _____
<input type="checkbox"/> Liability Insurance	Mentor/Supervisor _____
<input type="checkbox"/> GC Identification Badge	
Approved : Yes _____ No _____	
_____ Assistant Superintendent	_____ Date