



# Oceanside School District

## Administrative Internship Placement Request

Please download, complete in Adobe Acrobat, sign, and mail to:  
Ms. Pat Rodesk  
145 Merle Ave.  
Oceanside, NY 11572

or scan your completed form with signature and e-mail to:  
[prodesk@oceansideschools.org](mailto:prodesk@oceansideschools.org)

We welcome all educators seeking to complete their administrative internship in the Oceanside School District. In order to best support the process and experience, all administrative internship applicants must complete this form and forward to the Office of Curriculum, Instruction, and Research. Applicants will be scheduled for an interview with the Assistant Superintendent, and if accepted, the final determination of the administrator with whom the internship will take place will subsequently be shared.

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

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University Administrative Program: (please specify) \_\_\_\_\_

This internship is for : (check one)    SBL            SDL            Other \_\_\_\_\_

Dates for Internship: From: \_\_\_\_\_ To: \_\_\_\_\_

What are your objectives in undertaking an internship with Oceanside School District?

\_\_\_\_\_  
\_\_\_\_\_

Internship Requirements (include number of hours and any compulsory components):

\_\_\_\_\_  
\_\_\_\_\_

If you would like to request a specific Oceanside School District administrator with whom you would like to complete your internship with, please note that below.

\_\_\_\_\_

Applicant Signature \_\_\_\_\_

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**For Internal Use Only:**

Interview Date: \_\_\_\_\_ Placement Approved: \_\_\_\_\_

Assistant Superintendent Signature: \_\_\_\_\_

Internship Placement (who/how long/specific assignments and or responsibilities):