California State University Dominguez Hills
Special Education Program
Student Teaching or Directed Teaching Application

APPLICATION DUE NO LATER THAN DATE LISTED BELOW IN SCC 510:

☐ Spring Deadline: October 1st  ☐ Fall Deadline: April 1st

☐ Intern Option  ☐ Student Teaching Option

Program Area:  ☐ Mild/Moderate  ☐ Moderate/Severe  ☐ Early Childhood

Student ID:_________________________  CSUDH Email address:______________________________________

Name:________________________________________________________________

Last Name                                              First Name                                    Middle Initial

Former Name (if applicable):_________________

Mailing Address:______________________________________________________________

Street                                        City                                                Zip Code

Phone:______________________________________________

       Home                                                Cell

Fieldwork placements are made ONLY by the Special Education Program.

Intern Application Requirements
   _____ Unofficial transcripts of all credential coursework.
   _____ Copy of your Advisement Plan.
   _____ Copy of valid emergency, substitute permit, pre-intern credential, Certificate of Clearance or valid teaching credential
   _____ Completed Site Administrator Approval form.
   _____ Completion of preliminary general and special education fieldwork SPE 523, 525 or 556, 526 optional. TED coursework must have no grade lower than a C; SPE coursework must have no grade lower than a B-.

Student Teaching Application Requirements
   _____ Unofficial transcripts of all credential coursework.
   _____ Copy of your Advisement Plan.
   _____ Evidence of Negative TB Test taken within four years.
   _____ Copy of valid emergency, substitute permit, pre-intern credential, Certificate of Clearance or valid teaching credential.
   _____ Successful completion of early field experience: M/M or M/S SPE 556, ECSE SPE 549/550
   TED coursework must have no grade lower than a C; SPE coursework must have no grade lower than a B-.

Incomplete applications will delay the review and processing of your application and may disqualify your acceptance into Directed or Student Teaching.

I confirm that I have completed all prerequisites for Directed/Student Teaching and will be in my last semester of Preliminary credential coursework when I take Directed/Student Teaching.

Student Signature ______________________________________  Date ________________________

Revised 8/28/2014
California State University Dominguez Hills
Special Education Program
Intern Site Administrator Approval Form

**Student Information:** Students who have submitted their Directed Teaching Application must complete and return this form by the deadline specified below and enroll in the appropriate course.

**Term**
- Fall Semester - **Deadline for applying is April 1st**
- Spring Semester - **Deadline for applying is October 1st**

Check one: Mild/Moderate _______ Moderate/Severe _______ Early Childhood Special Education ______

Student ID# __________________________ CSUDH Email address: __________________________

Ms. 
Mr. 
Last Name __________________________ First Name __________________________ Middle Name __________________________

Home Phone Number: ( ) __________________________ Cell Phone Number: ( ) __________________________

Home Address: __________________________ __________________________ __________________________

School Name: __________________________ Subjects/Grade Assignment: __________________________

School Address: __________________________ __________________________ __________________________

School District: __________________________

Name of Site Administrator and Telephone: __________________________

Signature of Student: __________________________ Date: __________________________

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**Site Administrator Section:** The above-named credential candidate is an applicant for the final fieldwork experience in his or her Preliminary credential program. Each applicant is observed by a University field experience supervisor on a regular basis for the purpose of evaluating instructional competencies. You will receive a copy of the final field experience evaluation and we are asking you to complete it, directions will be provided.

Name of School Administrator: __________________________ Administrative Position: __________________________

Name of School: __________________________ District-NLS/Charter School: __________________________

Signature of Site Administrator: __________________________ Date: __________________________

Revised 8/28/2014