

# Department of Special Education STUDENT TEACHING APPLICATION

- ▶ **Spring semester .... due September 28**
- Fall semester ..... due February 28**

Name \_\_\_\_\_ Semester Intending to Student Teach \_\_\_\_\_

Only complete applications will be accepted by deadline. Students who complete their application after the deadline will be placed on a Wait List. Wait listed applicants will be approved for student teaching only if funds are available.

**STEP #1:** Download your unofficial transcript from the SFSU website – “MySFSU”, and complete the Credential Approved Program (CAP) form. Credential course requirements may be reviewed at [www.sfsu.edu/~spedcd](http://www.sfsu.edu/~spedcd).

**STEP #2:** Arrange to meet with your Advisor to review your transcripts. Bring the CAP form and your student teaching application for authorization by your Advisor.

**STEP #3:** Identify your credential objective below. Check (✓) preconditions met, and **attach copies of evidence for each precondition that you have met for your credential, even if you have submitted these materials at an earlier date.** Applications without all documents of evidence attached will be considered incomplete and will be rejected.

**Note:** If you hold a credential or permit issued by the California Commission on Teacher Credentialing (CCTC) make a copy and submit along with your application and CAP form in lieu of documentation below. Multiple-Subject, Single Subject, Education Specialist, and Intern credentials cover all preconditions listed below. Emergency Credentials or Permits only cover the COC and TB.

<b>Preliminary Education Specialist / Clinical Rehabilitative Services / Speech-Language Services Credentials</b>	
<input type="checkbox"/> Mild/Moderate Disabilities (M/M) <input type="checkbox"/> Moderate/Severe Disabilities (M/S) <input type="checkbox"/> Physical and Health Impairments (PHI) <input type="checkbox"/> Visual Impairments (VI)	<input type="checkbox"/> Early Childhood Special Education (ECSE) <input type="checkbox"/> Orientation & Mobility (O&M) <input type="checkbox"/> Speech-Language Pathology Services Credential (SLPSC)
<b>Preconditions:</b> ___ Credential Approved Program (CAP) ___ CBEST Result ___ TB Test Result ___ Subject Matter Competency, Test result or Waiver ___ COC - Certificate of Clearance: fingerprint or copy of current credential. A fee payable to the CCTC is applicable.	<b>Preconditions:</b> ___ Credential Approved Program (CAP) ___ CBEST Result ___ TB Test Result ___ COC - Certificate of Clearance: fingerprint, or copy of current credential. A fee payable to the CCTC is applicable.

**THIS STUDENT HAS MET ALL PRECONDITIONS AND IS RECOMMENDED FOR STUDENT TEACHING.**

Advisor approval: \_\_\_\_\_

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

The Department of Special Education will review your application and will notify you about your eligibility to enroll in student teaching course work.