# Sonoma State University

# School of Education

# Education Specialist Credential Program

# Application for Admissions towards a Second Credential

# (For candidates who already hold either a M/M or M/S credential only)

**\*Student’s name:**

Last Name

First Name

Middle Name

Maiden/Former Name(s)

**SSU ID (or SSN):**

xxxxxxxxx

**\*Phone:**

(xxx)xxx-xxxx

**\*E-mail Address:**

E-mail address

**Year Admitted/Applied:**

Year

**Address:**

Street

City

State

zip

**Credential Desired:** Credential Desired

**Supervised Practicum Experience - Supervised Practicum Experience—how do you anticipate meeting your student teaching/clinical experience in the second credential area?**

I wish to student teach.

In my current classroom (provide letter from program manager, as described below)

In a placement arranged by SSU

I will need an intern credential in the second credential area.

My current teaching assignment, in which I have been supervised by university faculty, spans the mild-moderate-severe spectrum of disabilities. (Provide letters as described below)

**Please attach the following to this form:**

Relevant special education coursework transcripts (if not an SSU graduate)

Copy of current credentials

To MEET student teaching-practicum requirement in second credential area:

Letter from special education program manager/administrator to document relevant teaching experience

Evidence that university faculty have observed teaching of students across the mild-to-severe range of disability

**FOR ADVISOR’S USE ONLY:**

Admit to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ credential program for: Semester \_\_\_\_ Year \_\_\_\_

Coursework needed: EDSP 425 EDMS 474 EDSP 426 EDSP 428

Practicum requirement will be met via: Prior Experience, Student Teaching, Internship, Other

Comments:

Approved by: (Print Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_

Copies to: Chair, ELSE  Candidate  Credential Office