**Special Education Initial Cert MAT\_01 Program (SEDD)**

**Eligibility for Student Teaching**

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **PAWS ID#** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Expected Stu Tchg Term**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Student will have completed 27 s.h. of coursework with cumulative **GPA of 3.0** or higher.

Student’s GPA\_\_\_\_\_\_ As of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ # Credits Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Demonstrated acceptable level of teaching performance/proficiency (**Minimum grade of "B"** in EDUC 694 or SPED 691.

Student’s grade in EDUC 694 or SPED 691: \_\_\_\_\_\_\_ Semester: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Student’s performance on the **Teaching Performance Assessment** in EDUC 694 or SPED 691:
* **Satisfactory:** No concerns have been indicated by the instructor, field supervisor, or cooperating teacher. The candidate has been rated as *proficient* or higher on all criteria.
* **Unsatisfactory**: Concerns have been indicated by the instructor, field supervisor, or cooperating teacher. The candidate has been rated as *not proficient* in one or more criterion.
1. Demonstrated **acceptable dispositions** in EDUC 694 or SPED 691.
* **Satisfactory**: No concerns have been indicated by the instructor, field supervisor, or cooperating teacher. The candidate has been rated as *proficient* or higher on all criteria.
* **Unsatisfactory**: Concerns have been indicated by the instructor, field supervisor, or cooperating teacher. The candidate has been rated as *not proficient* in one or more criterion.
1. Student has taken the **Praxis II for Elementary Education** (Test #5001).

Date(s) Praxis II was taken \_\_\_\_\_\_\_\_\_\_ \*Test Scores\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student meets\_\_\_\_\_ does not meet\_\_\_\_\_ the requirements for enrolling in student teaching. If a student does not meet the requirements, list the deficiency:**

**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**