

California State University Dominguez Hills

Special Education Program

EARLY FIELD EXPERIENCE OBSERVATION/PARTICIPATION DOCUMENTATION FORM

Directions: You must indicate completion of a TOTAL of 45 hours of field experience. **ECSE Candidates:** The 45 hours of field experience must be in a general education Pre K (public and/or non-public) setting and must be CLEARLY stated on the form and/or letter.

Anticipated Start Term: _____ SID: _____

SPE Candidate: _____
Last Name
First Name
Middle Name

Select One: Mild/Moderate Disabilities Moderate/Severe Disabilities ECSE (hours in a general ed Pre K setting)

Name of School Personnel: _____ Title: _____

School Name: _____ District: _____

School Telephone: _____ Grade(s): _____

Description	Hours	Verification
Classroom observation of credentialed teacher (General Ed Pre K)		Signature: Date:
Classroom observation of credentialed teacher (General Ed Pre K)		Signature: Date:
Classroom observation of credentialed teacher (General Ed Pre K)		Signature: Date:
Classroom observation of credentialed teacher (PreK-6)		Signature: Date:
Classroom observation of credentialed teacher (PreK-6)		Signature: Date:
Classroom observation of credentialed teacher (PreK-6)		Signature: Date:
Classroom observation of credentialed teacher (6-12)		Signature: Date:
Classroom observation of credentialed teacher (6-12)		Signature: Date:
Classroom observation of credentialed teacher (6-12)		Signature: Date:
Classroom observation of modifications for EL and/or special needs students		Signature: Date:
Interview with resource personnel: <ul style="list-style-type: none"> • Counselor/psychologist/nurse • Resource teacher • Speech pathologist • Administrator • Curriculum specialist 		Signature: Date:
LBS undergraduate* (ONLY for Mild/Moderate and Moderate/Severe)	45	Attach copy of degree
Paraeducator Experience* (ONLY for Mild/Moderate and Moderate/Severe)	45	Attach letter from district
Current credential* (ONLY for Mild/Moderate and Moderate/Severe)	45	Attach copy of credential
Experienced substitute teacher* (ONLY for Mild/Moderate and Moderate/Severe)	45	Attach letter from district

*Documentation of one of these waives the necessity for observations and signatures on form.