

# APPLICATION FOR STUDENT TEACHING

## Record of Credits – Special Education K-12



EVANGEL UNIVERSITY  
 1111 N. Glenstone Avenue  
 Springfield, Missouri 65802

Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First MI Maiden

Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_ Identification # \_\_\_\_\_

Total College Hours Completed \_\_\_\_\_ Total Education Hours Completed \_\_\_\_\_

**GENERAL EDUCATION** *Semester Completed*

- ENGL 111 *Composition I* \_\_\_\_\_
- ENGL 211 *Composition II* \_\_\_\_\_
- EDUC 330 *Children's Literature* \_\_\_\_\_
- ART 100 or MUSC 113 or DRAM 100 \_\_\_\_\_
- COMM 111 or 211 *Speech* \_\_\_\_\_
- BIBLICAL STUDIES (18 credits) \_\_\_\_\_
- GSCI 115 *Physical Science or equivalent* \_\_\_\_\_
- BIOL 101 *Biological Science* \_\_\_\_\_
- HIST 111 or HIST 112 \_\_\_\_\_
- GOVT 170 *American Government* \_\_\_\_\_
- PSYC 237 *Lifespan Psychology* \_\_\_\_\_
- SSCI 212 *Economics in Society* \_\_\_\_\_
- GEOG 211 *Geography* \_\_\_\_\_
- MATH 120 *Math I* \_\_\_\_\_
- MATH 121 *Math II* \_\_\_\_\_
- PHED 112 *Lifetime Fitness* \_\_\_\_\_
- PHED *Physical Education Activity Course* \_\_\_\_\_

**TEACHER EDUCATION** *Semester Completed*

- EDUC 219 *Foundations of Education* \_\_\_\_\_
- EDUC 221 *Curriculum/Instruction Elem. School* \_\_\_\_\_
- EDUC 235 *Educational Technology* \_\_\_\_\_
- EDUC 251 *Communication Arts I* \_\_\_\_\_
- EDUC 332 *Methods Elementary Math* \_\_\_\_\_
- EDUC 340 *Fine Arts for Elementary Teachers* \_\_\_\_\_
- EDUC 343 *Health/PE for Elementary Teachers* \_\_\_\_\_
- EDUC 346 *School Organization, Mgmt. & Law* \_\_\_\_\_
- EDUC 351 *Analysis/Correction Reading Difficulties* \_\_\_\_\_
- EDUC 370 *Sci./Soc. Studies for Elem. Teachers* \_\_\_\_\_
- EDUC 417 *Educational Psychology* \_\_\_\_\_
- EDUC 434 *Tests and Measurements* \_\_\_\_\_
- EDUC 451 *Communication Arts II* \_\_\_\_\_

**SPECIAL EDUCATION**

- EDUC 271 *Exceptional Student.* \_\_\_\_\_
- EDUC 320 *Intro. to Disabilities I* \_\_\_\_\_
- EDUC 321 *Intro. to Disabilities II* \_\_\_\_\_
- EDUC 337 *Language Development* \_\_\_\_\_
- EDUC 338 *Remediation/Mathematics* \_\_\_\_\_
- EDUC 345 *Counseling Techniques Special Ed.* \_\_\_\_\_
- EDUC 375 *Trans./Career Ed.* \_\_\_\_\_
- EDUC 380 *Methods/Disabilities I* \_\_\_\_\_
- EDUC 381 *Intern/Disabilities I* \_\_\_\_\_
- EDUC 385 *Methods/Disabilities II* \_\_\_\_\_
- EDUC 386 *Intern/Disabilities II* \_\_\_\_\_
- EDUC 487 *Spec. Ed. Eval., Prescrip., Diagnosis* \_\_\_\_\_

**CLINICAL EXPERIENCES ELEMENTARY EDUCATION**

- EDUC 220 *Practicum/Foundations of Ed.* \_\_\_\_\_
- EDUC 331 *Practicum/Math for Elem. Tch.* \_\_\_\_\_
- EDUC 371 *Teaching Practicum* \_\_\_\_\_
- EDUC 453 *Communication Arts Practicum* \_\_\_\_\_

*This student has sufficient background and personal qualifications to begin student teaching.*

Advisor \_\_\_\_\_ Major  Yes  No  
 Chair, Education Department \_\_\_\_\_ Major  Yes  No

*I hereby authorize the release of my transcript and other appropriate records for student teaching to the assigned school system.*

Signature \_\_\_\_\_ Date \_\_\_\_\_