



School of Education



Checklist of Application Requirements

Professional Level II Education Specialist Credential Program

1. Apply to Sonoma State University

Apply for admission to the University, submit application via www.csumentor.edu
Submit all required supporting documents to the University Admissions and Records Office (A & R). Please be aware of relevant deadlines.

(Continuing SSU students: please verify your current status with A & R.)

2. *Apply to the Professional Level II Program

All applicants must submit the following documents:

- _____ Program Application (SPED1)
- _____ Professional Goals Statement (SPED2)
- _____ Verification of Employment/Assignment of Support Provider (SPED3)

Applicants not obtaining their Level I credential from SSU must also submit:

- _____ Official Transcripts (2 sets-all colleges/universities)
- _____ Copies of Valid Teaching Credentials (including Level I Credential)
- _____ Current Letters of Recommendation (2 letters)

* Note: A 3.00 grade point average is required for admission to the Level II program

Important: Your application is a two-part process. You must apply to the University via www.csumentor.edu and to the Professional Level II Program (School of Education-Credentials Office located in Stevenson 1078). Admission to one does not ensure admission to the other.

(Continuing SSU students: please verify your current status with A & R.)

The Admission Process

The SSU Admissions and Records Office will assemble submitted transcripts, calculate GPA, and establish eligibility for admission to the university. Information will then be sent to the School of Education Credentials Office. Admission’s review of eligible candidates will begin 2-4 weeks after the close of the application period. You will receive notification from the School of Education Credentials Office of whether your application is complete, and if not, what documents are required. Following review of applications you will be notified in writing of your admission status. Separate university notification will come from the Admissions and Records Office. You must be admitted both to the University and to the specific credential program in order to register for classes.



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Program Application

Professional Level II Education Specialist Credential Program

School of Education Application Filing Periods	
For Admission in	Apply
<i>Fall Semester</i>	<i>November 1 to March 1</i>
Spring Semester	July 1 to October 1

Program for which you are applying: Mild/Moderate _____ Moderate/Severe _____

Personal Information

Name: _____
Last First (Former Name)

Soc. Sec. No.: _____ Date of Birth: _____ / _____ / _____

Home Address: _____
(Street) (City) (State) (Zip Code)

Telephone: Home: (_____) _____ Work: (_____) _____

E-Mail: _____ Fax: _____

Ethnic Identity -Indicate the group(s) with which you most strongly identify

- | | |
|---|----------------------------------|
| _____ 1. American Indian/Alaskan Native | _____ 13. Laotian |
| _____ 2. Black Non-Hispanic, including African American | _____ 14. Vietnamese |
| _____ 3. Mexican-American, Mexican, Chicano | _____ 15. Thai |
| _____ 4. Central American | _____ 16. Other Southeast Asian |
| _____ 5. South American | _____ 17. Guamanian |
| _____ 6. Cuban | _____ 18. Hawaiian |
| _____ 7. Puerto Rican | _____ 19. Samoan |
| _____ 8. Other Latino, Spanish-origin, Hispanic | _____ 20. Other Pacific Islander |
| _____ 9. Chinese | _____ 21. White |
| _____ 10. Japanese | _____ 22. Filipino |
| _____ 11. Korean | _____ 23. Other |
| _____ 12. Asian Indian | _____ 24. Decline to State |



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Employment Information

Name of District/Agency: _____

School/Site Name: _____

Address: _____
(Street) (City) (State) (Zip Code)

Telephone: (____) _____

Present Position and Title: _____

Length of time in present position with Level I Credential: _____

1. Current Valid California Teaching Credential(s):

<u>Credential</u>	<u>Expiration Date</u>	<u>Institution</u>
<input type="checkbox"/> Preliminary Level I Education Specialist	_____	_____
<input type="checkbox"/> _____	_____	_____
<input type="checkbox"/> _____	_____	_____
<input type="checkbox"/> _____	_____	_____

2. Have you previously applied for admission to an SSU Credential Program?

- ___ No ___ Yes
- If yes, for which program? _____
 - Semester applied: _____
 - Date Completed: _____

3. List all colleges/universities you attended for undergraduate or graduate degrees. Please indicate the dates of attendance and degree (s) earned if applicable. If you did not complete your Level I credential at Sonoma State University, you will need to provide two (2) copies of transcripts listed below.

<u>Institution</u>	<u>Dates Attended</u>	<u>Degree</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Have you taken Level II coursework at another University?

___No ___Yes

If yes, which University: _____

Course Title/Date/Units: _____

Course Title/Date/Units: _____

Course Title/Date/Units: _____

I understand that it is my responsibility to submit all required materials and documents directly to the School of Education Credentials/Admissions Office by the established deadlines dates, regardless of where else on campus they may have previously been sent. I understand that I must apply separately to the university via the Admissions and Records Office. I understand that admission to the program does not guarantee recommendation to the California Commission on Teacher Credentialing for a teaching credential. To the best of my knowledge, all information herein and in materials associated with this application is true and correct.

I have read and understand my responsibilities as noted above.

Signature of Applicant

Date

COMPLETE AND RETURN TO:
School of Education Credentials Office
Stevenson Hall 1078
Sonoma State University
1801 East Cotati Avenue
Rohnert Park, CA 94928



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Professional Goals Statement

Professional Level II Education Specialist Credential Program

(Please type on separate sheet of paper)

Name: _____ Date: _____

Program Emphasis (please indicate): _____ Mild/Moderate _____ Moderate/Severe

The mission of Sonoma State University's programs in special education is the advancement of excellence within the special education profession. Central to this mission is the crafting of preparation programs that reflect best practice, empirical support, as well as values founded in respect for the humanity, educational progress, and improved lives of learners with special needs. The core values of our program center upon educational and social success as dynamic contributors to the quality of lives for learners with special needs and their families. In all, we seek to prepare special educators who provide effective education, respect, and individualization for learners with special needs and who are committed to ongoing professional growth in their careers as reflective practitioners of their craft.

Given this mission, please indicate why you are interested in applying to the Professional Level II Education Specialist Credential Program at Sonoma State University. Include in your response how you envision the Level II program might contribute to your ongoing professional growth as a special educator. Please limit your response to two (2) double-spaced typewritten pages.



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Verification of Employment as an Education Specialist & Assignment of Support Provider

Applicant's Full Name: _____
Social Security Number: _____

The applicant listed above is in the process of applying to the Professional Level II Education Specialist Credential Program at Sonoma State University. Prior to admittance, the following requirements must be met:

1. Verification of employment as an Education Specialist (Special Education Teacher)

Please verify his/her employment status with your agency.

Title of Education Specialist Position: _____
Date of Initial Employment with Level I Credential (mm/dd/yyyy): _____
County of Employment: _____
Name of Employing Agency: _____
Mailing Address: _____
City: _____ State: _____ Zip code: _____
Telephone: () _____ - _____
Name and Position of Immediate Supervisor: _____

Signature of School/Agency Official Printed Name of School/Agency Official Date

2. Assignment of Field Mentor/Support Provider

In order to enter the Level II program, the employing educational agency must assign a *Support Provider* to the applicant given his/her recent employment as a special education teacher. The support provider will assist the beginning teacher with activities that facilitate his/her professional development and effective performance. The support provider must be selected based upon her/his professional experience, coaching skills, knowledge of the profession and related credentials, as well as her/his ability to provide for the individual needs of the applicant. The applicant's employer should review the required competencies included with the attached letter and select a Support Provider who meets the criteria and is capable of providing support.

Field Mentor/Support Provider

Name: _____ School/Location _____
Job Title: _____
Credentials Held: _____

COPIES OF THIS FORM SHOULD BE FILED WITH THE EMPLOYER AND UNIVERSITY

Completed Original: SSU with Level II Application
Completed Copy: Candidate
Completed Copy: Employing Agency-Personnel File

SSU-SPED
Rev.02.10.09



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Dear Support Provider:

_____ is an applicant for the Level II Education Specialist Credential Program at Sonoma State University. An important initial requirement for entering this program is that the employing educational agency must assign a Support Provider to the new special education teacher. Your district/agency has selected you as a Support Provider to assist with activities that will facilitate the professional development and effective performance of the above-mentioned candidate. The purpose of this letter is to inform you about your role.

Formally, the assigned Support Provider must (1) hold a current teaching credential authorizing them to teach in the area covered in the candidate's classroom (2) must have at least two years of successful teaching experience, and (3) a willingness to collaborate with both the candidate and University faculty. Your selection as a Support Provider was based upon your professional experience, coaching skills, and knowledge of the profession, as well as your ability to provide for the individual needs of the candidate.

Initially, the candidate will be developing a Professional Induction Plan. This plan serves as the foundation of his/her ongoing professional development, which includes both University based activities (coursework) as well as professional development activities offered by the district or individually pursued by the candidate. As the candidate progresses through the Level II program, he/she will craft Applied Field Projects (AFP's) focusing on a variety of topics related to his/her professional development in Special Education.

Your primary role as a Support Provider is to mentor the candidate in ways that encourage reflection, build trust, and facilitate professional growth and development during the candidate's participation in the Level II program. To this end, periodic meetings with the candidate to initially review his/her Professional Induction Plan and subsequent Applied Field Projects should be coordinated. In addition, University faculty may also contact you and the candidate to discuss his/her progress in the Level II program. Contact will be open and collegial in nature and your input is a valued component of this process.

Your assignment as a Support Provider must be agreed to by the employing district, Support Provider, University faculty advisor, and candidate. The attached form must be completed in order for the candidate to be formally admitted to the Level II program at Sonoma State University

Thank you for your willingness to support a colleague in pursuit of his/her Professional Clear Credential. Please do not hesitate to contact me if you have any questions.

Sincerely,
Emiliano C. Ayala, Ph.D.
Assistant Professor-Level II Advisor
(707) 664-3490 or emiliano.ayala@sonoma.edu