

## College of Education Application for EDSP 204

## **Intro to Teaching Exceptional Learners**

Please Return Application to COE 261.

Name:		
ID Number:	E-Mail:	
Address:		Phone:
City:	_State:	Zip Code:
Semester requested: Fall Sp	ring Summe	erYear

Section No. EDSP 204-\_\_\_\_ [Example: 001, 002] and CRN \_\_\_\_\_ [Example: 99999] for course registration.

Teaching Major	2 <sup>nd</sup> Teaching Major (If Applicable)	Mino	r or Concentration (If Applicable)
Proroquisitos		Date	FTP Admin's Initials

Prerequisites	Date	ETP Admin's. Initials Room COE 261/219
Criminal Background Report (fingerprints) cleared and current.	CBR Date Office Use Only	Office Use Only

## Initial to indicate this important information has been read

Placements are made by the class instructor in community based programs (e.g. Eagle Mount and the Billings Education Academy) to meet the 15 hours of field experience.

CLASSES ARE MANDATORY.

Students will not be registered for Field/Clinic experiences if their criminal background report expires before the completion of the experience or the end of the semester, whichever is later.

I understand that if I receive a grade lower than a C in my major(s) or minor courses, I will not be able to participate in Field/Clinic experience. I understand that I will be dropped from Field/Clinic experience if any grades are below a C. I will not be eligible until I have retaken the class and received a grade of C or higher and I will plan accordingly.

Student's Signature (Required)

Date

Please Return Application to COE 261.

EDSP 204 Instructor's Signature Date

Initial