



## SPECIAL EDUCATION FIELD EXPERIENCE REQUEST FORM

*To ensure you have a field experience placement, applications are due by **May 1<sup>st</sup>** for fall and summer semesters and **November 1<sup>st</sup>** for spring semester. Applications processed after the deadline are approved as placements are available.*

*Submit to: UND Special Education Program Area  
231 Centennial Dr. Stop 7189 Education Building (Room 303)  
Grand Forks, ND 58202-7189*

Date of Request \_\_\_\_\_ Name \_\_\_\_\_ ID# \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

COURSE TITLE	SEMESTER (circle)	YEAR
_____ <b>SPED 585 Internship: Visual Impairment (VI)</b> <i>120 student contact hours.</i>	<i>Prereq: All coursework must be completed</i>	
_____ Traditional option	Fall Spring Summer	_____
_____ On-the-Job option	Fall Spring Summer	_____
_____ <b>SPED 586 Internship: Emotional Disturbance (ED)</b> <i>120 student contact hours.</i>	<i>Prereq: All coursework must be completed</i>	
_____ Traditional option	Fall Spring Summer	_____
_____ On-the-Job option	Fall Spring Summer	_____
_____ Resident Teacher option	Fall Spring Summer	_____
_____ <b>SPED 587 Internship: Developmental/Cognitive Disabilities (DCD)</b> <i>120 student contact hours.</i>	<i>Prereq: All coursework must be completed</i>	
_____ Traditional option	Fall Spring Summer	_____
_____ On-the-Job option	Fall Spring Summer	_____
_____ Resident Teacher option	Fall Spring Summer	_____
_____ <b>SPED 588 Internship: Learning Disabilities (LD)</b> <i>120 student contact hours.</i>	<i>Prereq: All coursework must be completed</i>	
_____ Traditional option	Fall Spring Summer	_____
_____ On-the-Job option	Fall Spring Summer	_____
_____ Resident Teacher option	Fall Spring Summer	_____
_____ <b>SPED 589 Internship: Early Childhood Special Education (ECSE)</b> <i>120 student contact hours.</i>	<i>Prereq: All coursework must be completed</i>	
_____ Traditional option	Fall Spring Summer	_____
_____ On-the-Job option	Fall Spring Summer	_____
_____ Resident Teacher option	Fall Spring Summer	_____

You are required to have a range of field-based experiences across ages/grades. To ensure you have this range of experiences, please provide documentation by circling which level of students/children you worked with for the following field-based experiences:

Field-Based Experiences	Age/Grade Levels (circle one)
SPED 557 Progress Monitoring	<ul style="list-style-type: none"> <li>• Elementary</li> <li>• Secondary</li> <li>• Birth to 3 years of age (for ECSE &amp; VI)</li> <li>• 3 to 6 years of age (ECSE only)</li> <li>• Kindergarten to 3<sup>rd</sup> grade (ECSE only)</li> </ul>
SPED 578 Behavior Management	<ul style="list-style-type: none"> <li>• Elementary</li> <li>• Secondary</li> <li>• Birth to 3 years of age (for ECSE &amp; VI)</li> <li>• 3 to 6 years of age (ECSE only)</li> <li>• Kindergarten to 3<sup>rd</sup> grade (ECSE only)</li> </ul>
SPED 551 Advanced Assessment <i>and/or</i> SPED 511 Identification/Assessment of Young Children with Special Needs SPED 505 Low Vision Assessment and Remediation	<ul style="list-style-type: none"> <li>• Elementary</li> <li>• Secondary</li> <li>• Birth to 3 years of age (for ECSE &amp; VI)</li> <li>• 3 to 6 years of age (ECSE only)</li> <li>• Kindergarten to 3<sup>rd</sup> grade (ECSE only)</li> </ul>
SPED 554 Advanced Methods: LD <i>and/or</i> SPED 555 Advanced Methods: ED <i>and/or</i> SPED 556 Advanced Methods: DCD <i>and/or</i> SPED 512 Methods/Materials for Preschool Children with Special Needs <i>and/or</i> SPED 514 Intervention Strategies for Infants and Toddlers  SPED 502 Braille Reading and Writing	<ul style="list-style-type: none"> <li>• Elementary</li> <li>• Secondary</li> <li>• Birth to 3 years of age (for ECSE &amp; VI)</li> <li>• 3 to 6 years of age (ECSE only)</li> <li>• Kindergarten to 3<sup>rd</sup> grade (ECSE only)</li> </ul>

**Advisor Signature** \_\_\_\_\_

**\*\*When submitting this application, please be sure all supporting documents are included\*\***

<b>Office use only</b>	Approved by Program Area _____	Age/Grade Level Needed _____
	Call # _____	Permission # _____
	Sent to Student _____	