

UNIVERSITY OF NORTHERN COLORADO
Division of Exceptionalities and Bilingual/ESL Education

APPLICATION FOR WAIVER OF PRACTICUM

I am requesting a waiver of my practicum in _____
(area).

Name: _____ Bear #: _____

Street Address: _____

City/State/Zip: _____

Home Phone (_____) _____ Work Phone(_____) _____

Student requesting a waiver of Practicum must provide:

1. Copy of Special Education Endorsement and copy of transcript indicating practicum hours (minimum of 6 semester hours).
2. Verification of 5 years out of the last 8 years teaching experience in proposed area of endorsement. Any one or more of the following are appropriate:

Letter from immediate supervisor
Copy of contracts
Copies of evaluation during employment

3. Copy of evaluations or letter from immediate supervisor indicating successful teaching experience in proposed endorsement area.
4. Recommendation of advisor.

Upon completion of **all** documentation, please forward to your advisor who will forward it to the University Approval Committee.

Date materials given to Advisor: _____

To be completed by University Approval Committee:

1. Interview needed? _____ yes _____ no
2. Approved by University Approval Committee? _____ yes _____ no

Date approved: _____

Committee Chair: _____