



**GRAD TSD CERT
Clinical Placement
SPC 6750 ASSESSMENT OF LEARNING IN CLINICAL PRACTICE
District Permission Letter**

Student Name: _____

Student 855 number: _____

District/School: _____

A requirement of the graduate level endorsement program that leads to the Teacher of Students with Disabilities certification is the course SPC 6750, Assessment of Learning in Clinical Practice. This course provides students with a closely supervised opportunity to demonstrate mastery of CEC Common Core Knowledge and Skills by integrating special education theory and application in a classroom environment.

A requirement for this class is that the teacher candidate teaches two lessons that will be evaluated by a faculty member from the William Paterson University College of Education. The above named student is requesting that he/she complete this requirement in your school during the _____ semester.

By signing this letter, the district / building level administration is giving approval for the above named student to complete the SPC 6750 requirement in the classroom where he/she works.

Thank you for your assistance with this matter.

Sincerely;

Margaret Renn
Director, Office of Field Experience
William Paterson University

Administrator Signature: _____

Administrator printed name: _____

District / School: _____

Date: _____

* the student must return this form to the Graduate Director in V3003 by the stated due date in the prior semester in order to be permitted to register for the required seminar. Late applications are not accepted.