

BRENAU UNIVERSITY COLLEGE OF EDUCATION
 CLINICAL EXPERIENCES OFFICE
FIELD EXPERIENCE EXPERIENTIAL CREDIT APPLICATION

Name _____ Student ID# _____

Address _____ City _____

State _____ Zip _____ Brenau Email _____ @tiger.brenau.edu

Phone (Cell) _____ Phone (Home) _____

Major: Early Childhood _____ Middle Grades _____ Special Education _____ Secondary _____

Program: BA/BS degree _____ MAT degree _____ Adviser _____

Semester entered Brenau University: Spring _____ Summer _____ Fall _____ Year _____

Course for which you are requesting credit: (Please circle one)

Undergraduate

<u>Early Childhood</u>	<u>Middle Grades</u>	<u>Special Education</u>
(PK-K) ED 210	(4-5) ED 216	(1-3/4-5) SE 202*
(1-3) ED 310	(6-7) ED 316	(6-8) SE 302
(4-5) ED 405	(8) ED 406	(9-12) SE 402

Graduate

<u>Early Childhood</u>	<u>Middle Grades*</u>	<u>Secondary*</u>	<u>Special Education</u>
(PK-K) ED 655	(4-5) ED 667	(7-8) ED 691	(1-3/4-5) SE 601*
(1-3) ED 656	(6-7) ED 668	(9-10) ED 692	(6-8) SE 602
(4-5) ED 657	(8) ED 669	(11-12) ED 693	(9-12) SE 603

*When applying for a full experiential credit for SE 202/601, students must have experiences in both groups (1-3 AND 4-5). If not, students must contact their advisers for guidance.

Experiential Credit is only available for students who have met at least one of the following requirements in each grade level they are applying for:

- Experience as a paraprofessional
- Experience as a certified teacher
- Experience as a LONG-TERM substitute (minimum of 9 weeks in the SAME classroom)

You must provide the following documents with this application in order to be considered for approval:

- A letter verifying your employment as either a paraprofessional, teacher, or long-term substitute (>9 weeks) including your duties, responsibilities, grade level(s), and length of employment in that position. This letter must come from the school principal on school letterhead and must be the original letter. NO COPIES.
- A brief summary of your experiences, including grade levels, written by you.
- BAD (Brenau Assessment of Dispositions) to be completed by your school principal/administrator.

A separate application form, letter, and narrative must be submitted for each credit you are applying for.

School: _____ System: _____

Principal: _____ Grade: _____

Teacher with whom you worked: _____ How long? _____

 Applicant's Signature Date

 Academic Adviser's Signature Date