

PROFESSIONAL CLEAR LEVEL II EDUCATION SPECIALIST
CREDENTIAL PROGRAM

Non-University Activities Form

Distribution: Candidate completes and submits to instructor for signature and course credit. Instructor files form with signature in department records and candidate retains all original materials in Induction Portfolio.

MILD/MODERATE MODERATE/SEVERE EARLY CHILDHOOD

Candidate Name _____ CWID _____

Semester/Year _____ Faculty Advisor _____

Date Submitted _____ Instructor _____

Non-University Activities Requirement

In fulfillment of the requirements for the Level II credential, the candidate will provide evidence that he/she has participated in three non-university activities **related to the specific emphasis on your induction plan**. See the course syllabus for additional details.

Evidence of Meeting Requirement (Attach documentation and reflection)

Title/Type of Activity	Date Completed	Time Attended/Documentation Provided

Additional Information (Optional)

SIGNATURE OF INSTRUCTOR _____

DATE _____