



CALIFORNIA STATE UNIVERSITY  
**FULLERTON**

Department of Special Education  
(657) 278-5453  
SPED Fieldwork Student Assistant  
(657) 278-8068

FORM: DT-SFP

Revised May 2018

**Education Specialist Credential**  
*Student Fieldwork Profile Form*

<b>Name</b>		<b>CWID</b>	
<b>Home Address</b>		<b>City</b>	
<b>Phone</b>		<b>Email</b>	
<b>Anticipated Semester/Year of Student Teaching</b>		<b>Existing Credential(s)</b>	
<b>Program</b>	<input type="checkbox"/> Mild/Moderate <input type="checkbox"/> Moderate/Severe <input type="checkbox"/> ECSE <input type="checkbox"/> ECSE Authorization		
<b>Placement Interest ("X" all that apply)</b>	<input type="checkbox"/> Birth-3 <input type="checkbox"/> Preschool <input type="checkbox"/> K-3 <input type="checkbox"/> 4-6	<input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> Adult Transition <small>*Note: Districts may require single subject competency for secondary placements</small>	<input type="checkbox"/> English <input type="checkbox"/> Language Arts <input type="checkbox"/> Math
<b>Course</b>	<input type="checkbox"/> 488 <input type="checkbox"/> 489A <input type="checkbox"/> 489B <input type="checkbox"/> 489C <input type="checkbox"/> 489D		
<b>Course Load</b>	<input type="checkbox"/> Part Time (6 units or less) <input type="checkbox"/> Full Time (7 units or more)		
<b>Location Preference</b>	<input type="checkbox"/> North County (ie. Fullerton) <input type="checkbox"/> Mid-County (ie. Santa Ana) <input type="checkbox"/> South County (ie. Irvine) <small>*Special Location Request:</small>		
<b>Additional Programs ("X" all that apply)</b>	<input type="checkbox"/> Employed Intern Teacher <input type="checkbox"/> Titan EDUCATOR		

**Intern Information (For contracted and employed interns only)**

<b>School Name</b>		<b>School Phone</b>	
<b>School District</b>		<b>Grade Level</b>	
<b>School Address</b>		<b>City/Zip</b>	
<b>Principal</b>			

**Candidate Certification**

I certify that I have met all coursework required for this student teaching experience and have successfully passed all required portions of the appropriate CSET/CBEST. By typing/signing your name below you certify that all of the above information is correct.

<b>Candidate Signature</b>		<b>Date</b>	
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**Emergency Contact (Name & Phone)**