NORTHWESTERN OKLAHOMA STATE UNIVERSITY
CERTIFICATION ONLY PROGRAM

READING SPECIALIST

Name: _____   Student ID #: _____

Address: _____

Phone (Home): _____   (Work): _____   Email: _____

ATTACH the following:

Other Evidence

1. _____   Evidence of master's degree: (Transcript from issuing educational institution)
   _____

2. _____   Evidence of certification: (Copy of current teaching license)
   _____

3. _____   Evidence of passing certification tests: (Official Certification Test Results)
   _____

READING SPECIALIST COURSEWORK	Sem/Year	COMMENTS:
Pre-requisite- Six (6) hours undergraduate reading courses		
Examples: EDUC 3313 Children's Lit		
EDUC 3413 Emergent Literacy		
EDUC 4413 Diag/Corr Reading		
Content Courses		
EDUC 5010, Graduate Seminar		
EDUC 5403, Adv. Dev. Rdg-Primary		
EDUC 5413 Adv. Dev. Rdg-Int/Sec		
EDUC 5433, Diag/Corr Tech. of Rdg.		
EDUC 5453, Clinical Proc. in Rdg.		
EDUC 5532, Practicum-Lrng. Prob. I		
EDUC 5542, Practicum-Lrng. Prob. II		
EDUC 5500, Practicum- Dev. Rdg. Instr.		
EDUC 5283, Literacy Assessment		
EDUC 5503, Curr/Supv. Probs. in Rdg.		
Submit Action Research Project		

STATEMENT OF INTENT

I understand that completion of this additional coursework and requirements is for certification recommendation only, and not a second master's degree. _____ (Initial)

- I agree to abide by the regulations governing the graduate program as stated in the Graduate Catalog.

CERTIFICATION ONLY PLAN APPROVED

SIGNATURES

Student   _____   Date: _____

Advisor   _____   Date: _____

Director of Teacher Education   _____   Date: _____

Graduate Studies, Associate Dean   _____
     Date: _____