

ADVISOR APPROVAL FORM – Elementary Education

Student _____ A# _____ Cactus # _____

NOTE: All communication from the Office of Field Experiences will be sent to student's preferred email in Banner As of the date of application for student teaching.

Semester student will be student teaching: ☐ Fall ☐ Spring Year _____

Please indicate student's licensing areas:

☐ ELED 5250 – All students required

Cleared Background Check date: _____

☐ ELED Only (ELED 5150)

☐ ECE Only (ELED 5050)

☐ ELED/ECE Dual (ELED 5050 and 5150)

☐ K-6 (ELED 5050 and 5150)

☐ SPED/ELED DUAL (SPED 5210 and ELED 5150)

☐ SPED/ECE DUAL (SPED 5210 and ELED 5050)

☐ SPED/ELED/ECE (SPED 5210 and ELED 5150 and ELED 5050)

☐ Math Endorsement

☐ DLI ☐ OPI Adv. Mid.

☐ Other _____

☐ Para-Professional?

Current Overall GPA: _____

Required Courses

B- or Better

☐

ELED 1010
FCHD/HDFS 1500

☐

TEAL 3000/3001/3002
TEAL 5500/ITLS 5500
TEAL 2660/3660
SPED 4000
ELED 4150
ELED 5105

☐ Completed/Enrolled Date _____

☐

ELED 4000/4020
ELED 4030/4032
ELED 4040/4042
ELED 4050
ELED 4062
TEAL 5560/ELED 4056 (practicum)

☐ Completed/Enrolled Date _____

☐ ECE Requirements

HDFS/FCHD 2600

HDFS/FCHD 2630

HDFS/FCHD 4550

ELED 2480

HDFS/FCHD 4960

☐ Completed/Enrolled Date _____

☐ ELED 4061

☐ ELED 3100

☐ MATH 2020 (C or better)

☐ MATH 2010 (C or better)

Advisor's Recommendation for Student Teaching:

Name _____ Date _____ Signature _____