Boot Camp Provider Application Non-Traditional Route to Special Education Teacher Certification

CONTACT INFORMATION

NAME OF IHE/DISTRICT(S)/INTERLOCAL CO-OP(S)

CONTACT PERSON

NAME OF RESPONSIBLE PARTY

EMAIL ADDRESS OF CONTACT PERSON

WORK PHONE NUMBER

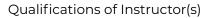
CELL PHONE NUMBER

STRUCTURE OF PLANNED BOOT CAMP

Include schedule (days and times) and format (location and presentation type)

DATES OF THE PLANNED BOOT CAMP

Include start date and planned completion date



District instructors must hold current teacher certification in special education and have experience teaching in a special education classroom. University instructors must meet all the hiring requirements of the relevant university.

Please submit a resume for each instructor who will offer the classes and monitor the field experience(s).

Instructor One

Instructor Two (if needed)

Instructor Three (if needed)

Instructor Four (if needed)

Instructor Five (if needed)



- > Adhering to the State Board approved program guidelines
- > Providing documentation to demonstrate that each candidate has completed all program components.

PROGRAM CONTACT

Signature	
Name	_
Title	
RESPONSIBLE PARTY	
Signature	
Name	_
Title	

Preferred Submission Method

Submit completed application electronically (including a scanned copy of driver's license and a copy of transcripts to):

Carolyn.Thomas@sde.ok.gov

Alternative Forms of Submission Mailing Address:

OSDE: Special Education Services

HB1233 Certification Boot Camp Application

2500 N. Lincoln Boulevard, Suite 412

Oklahoma City, OK 73105

The checklist is provided for review to ensure that the applicant has all required information need to process the application.



- Letter from Governing Body
- Structure of Planned Boot Camp

Resume for Instructor

Competency Evidence

- Introduction to Special Education
- Individualized Education Plan (IEP)
- Behavioral Management
- Effective Teaching, Reading, and Math Strategies
- Assessment · Legal and Ethical Issues

Description of Field-Based Component

Summary of Competency Demonstration (including evidence)

Comments:

For Office Use Only Date	Date Reviewed
Approved Yes No	
Committee Signatures	