
ReadOregon Reading Endorsement Practicum Sign-up Form

Placement preferences	<p>Age level: <i>(Must match teaching license levels of authorization)</i></p> <p><input type="checkbox"/> ECE <input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> High School</p> <p><input type="checkbox"/> Check here if you need a placement Preferred School and/or District:</p> <p>1. _____ 2. _____ 3. _____</p> <p>I understand that before I can be considered for placement, I must: _____ Submit proof of fingerprint clearance to the field placement office. Fax: 503-725-8475.</p> <p>_____ Forward an electronic resume in Word format to: fieldplacement@pdx.edu.</p> <p><input type="checkbox"/> Check here if you plan to do practicum in your own classroom/school. Provide school information below:</p> <p>School _____ District _____ Principal _____ School phone no. _____</p> <p>Practicum Supervisor : _____ (Principal, Title I Teacher, District Title I, Endorsed Reading Specialist)</p> <p>_____ _____</p>
Please return this form to:	<p>Valerie Katagiri, MPH Continuing Education/Graduate School of Education Portland State University PO Box 751 Portland, OR 97207-0751 Fax 503-725-5599 E-mail katagiri@pdx.edu</p>