Department of Special Education & Interventions
Verification of Experience in Schools Form

Before applying for acceptance into the professional program, you are required to complete a total of **forty (40) hours** of experience in public school settings. **Thirty (30) hours** of this experience must consist of observations of *students with disabilities in special or general education settings*; **ten (10) hours** of experience must be done in *general education* settings.

These observations might consist of:

1. Direct observation of students
2. Shadowing of administrator or related services staff member
3. Tutorial/aide/paraprofessional/volunteer worker

You may need to complete more than one of these forms. A principal or person supervising your experience must complete and sign below. Upload this form to your Professional Program application in TaskStream.

**Applicant Name:** Banner ID:

**Principal or supervisor verification:**

I certify that *(student's name)* has completed *(check one or both of the following):*

- **☐ Thirty (30) hours** of experience with *students with disabilities in special or general education* settings.
- **☐ Ten (10) hours** of experience in *general education* setting.

**Signature of Principal or Supervising Person:** __________________________

**Print Name:** ______________________________________________________

**Title:** ___________________________________________________________

**School and District:** ______________________________________________

**Phone Number of School:** __________________________

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