

PROFESSIONAL LEVEL II EDUCATION SPECIALIST INDUCTION PLAN

MILD / MODERATE DISABILITIES PROGRAM

NAME	SFSU STUDENT ID
#	()
ADDRESS	STUDENT HOME PHONE
CURRENT EMPLOYMENT	GRADE LEVEL () STUDENT WORK PHONE
EMPLOYER DESIGNATED SUPPORT PROVIDER	() SUPPORT PROVIDER PHONE
UNIVERSITY FACULTY ADVISOR	() UNIVERSITY ADVISOR PHONE

ADMISSION REQUIREMENT: Completion of Preliminary Level I Education Specialist Credential Program and verified employment in the area of Mild/Moderate Disabilities

Program Curriculum (2 units)	
SPED 740 Induction Plan Development and Implementation (1 unit) – F, S <ul style="list-style-type: none"> • Enrollment First Semester in Program (1 unit) • Enrollment Exit Semester in Program (1 unit) 	DATE COMPLETED
Credential Approved Program – Level II (prior to, or during Exit semester)	_____

Specialized Standards for Mild/Moderate (6 units)	NON-IHE EQUIVALENT	DATE COMPLETED
SPED 824 Advanced Behavior and Instructional Supports (3 units) – F, S	_____	_____
SPED 763 Transition and Transition Planning (3 units) – F, S	_____	_____

Individualized Requirements for Mild/Moderate (9 units)		
Determined in collaboration with employer, designated support provider and university advisor and included in the professional portfolio. Select area(s) of specialization and three related courses (or non-IHE equivalent) in coordination with advisor.		
<input type="checkbox"/> Learning Specialist <input type="checkbox"/> Language, Literacy and Exceptionality <input type="checkbox"/> Services Integration <input type="checkbox"/> Social, Emotional, Behavior Support <input type="checkbox"/> Other by advisement _____	NON-IHE EQUIVALENT	DATE COMPLETED
SPED 709 Advanced Differential Diagnosis (3) - S	_____	_____
SPED 778 Advanced Literacy and Instruction (3) - F	_____	_____
SPED 793 Atypical Cognitive Development (3) - F	_____	_____
SPED 746 Teaching Individuals, Physical & Other Health Impairments (3) - F	_____	_____
SPED 743 Issues in Augmentative / Alternative Communication (3) - S	_____	_____
SPED 781 Educ. of Students, Serious Emotional /Behavior Disorders (3) - S	_____	_____
SPED 791 Education of Students with Autism Spectrum Disorders (3) - F	_____	_____
EDUC 703 School / Community Partnership for Change (3) - F	_____	_____
EDUC 803 Integrated and Collaborative Services for Children (3) – S	_____	_____
AND		
30 hrs. classroom experience with EL students verified by support provider		

Additional State Requirements	COURSE	NON-IHE EQUIVALENT	DATE COMPLETED
• Health Education (HED 630, HED 635 or other by approval)	_____	_____	_____
• CPR (must cover infant, child and adult)	_____	_____	_____
• Technology (SPED 716, or other by approval)	_____	_____	_____

SIGNATURES

STUDENT	DATE
EMPLOYER DESIGNATED SUPPORT PROVIDER	DATE