

**PK-3 ECE Specialist Instruction Credential Program
Student Teaching Pathway Plan**

Name: _____

Net ID: _____

CSUEB Email: _____

Phone: _____

Semester 1 (Summer) - 12 Units				
Course Number	Course Title	Units	Grade Earned	Semester Completed
TED 590	Foundations in the Practice of Teaching PK-3	3		
TED 591	Language Development and Pedagogy for PK-3	3		
TED 592	Literacy Development for PK-3	3		
TED 594	Diversity, Equity, & Inclusive Practices	3		
Semester 2 (Fall) - 12 Units				
Course Number	Course Title	Units	Grade Earned	Semester Completed
TED 578	Seminar 1	2		
TED 584A	*Student Teaching 1 (<i>Circle One: PK-TK OR K-3</i>)	3		
TED 593	Language Arts and Social Studies	4		
TED 595	Including and Serving Children in PK-3 Environments	3		
TED 597	Mathematics Discovery & Development in PK-3	3		
*Candidates MAY be granted clinical practice equivalency for TED 584A.				
FALL Equivalency Option (List Option 1 and/or 2 below)		# of Hours Granted	Date Granted	
IF an equivalency option is granted, use this section to NOTE the number of clinical practice hours the candidate will complete, in which setting, and during which semester (fall, spring, or both).				
Semester 3 (Spring) - 12 Units				
Course Number	Course Title	Units	Grade Earned	Semester Completed
TED 579	Seminar 2	2		
TED 584B	*Student Teaching 2 (<i>Circle One: PK-TK OR K-3</i>)	3		
TED 596	Integrated Science and Inquiry in PK-3	3		
TED 598	Arts, Movement, and Health Practices for PK-3	3		
TED 599	Professionalism & Technology in PK-3	2		
*Candidates MAY be granted clinical practice equivalency for TED 584A.				
SPRING Equivalency Option (List Option 1 and/or 2 below)		# of Hours Granted	Date Granted	
IF an equivalency option is granted, use this section to NOTE the number of clinical practice hours the candidate will complete, in which setting, and during which semester (fall, spring, or both).				

Advisor Notes:

Read each of the statements below. Acknowledge your understanding of these requirements by initialing next to each statement and then signing and dating this plan.

	I understand I must complete a total of 600 hours of clinical practice (fieldwork). If I submit a Clinical Practice Equivalency Form and all required verification documents, I may be granted equivalency for up to 400 hours of the required clinical practice experience in a PK or TK setting. If granted equivalency, I still must complete all other program requirements, including a clinical practice experience of at least 200 hours in a K-3 setting.
	I understand I must maintain a cumulative grade point average of 3.0 in required courses, and I may never have more than 2 Incompletes (I) or any grades of D, F, or No Credit (NC).
	I understand I must pass the RICA assessment prior to applying for their PK-3 ECE Specialist Instruction Preliminary Credential.
	I understand I must pass the edTPA prior to applying for their PK-3 ECE Specialist Instruction Preliminary Credential.

Student Signature:

Date Signed:

Faculty Name:

Title:

Faculty Signature:

Date Signed:

THE CALIFORNIA STATE UNIVERSITY

Bakersfield / Channel Islands / Chico / Dominguez Hills / East Bay / Fresno / Fullerton / Humboldt / Long Beach / Los Angeles / Maritime Academy
Monterey Bay / Northridge / Pomona / Sacramento / San Bernardino / San Diego / San Francisco / San José / San Luis Obispo / San Marcos / Sonoma / Stanislaus