Admissions & Evaluations – STEP II Program Application



STEP II Program Application (MSTEP)

If you are ready to complete the MSTEP II application, you are about to begin the student teaching phase of the Multiple Subject Teacher Education Preparation (MSTEP) program. This packet has been organized to help you formally apply for a Clinical Practice placement.

GUIDELINES

APPLICATION

- This MSTEP II application is an application for both the Clinical Practice II (EDUC 454, 8 units) and Clinical Practice III (EDUC 456, 12-units) assignments: The Clinical Practice assignments must be completed in consecutive quarters (not including summer) or you must reapply before beginning the final clinical practice assignment.
- The MSTEP II application should be turned in to the School of Education Credential Office (Bldg 02, Room 120) by Monday of the fourth week of the quarter, preceding the quarter in which you would like to begin your first quarter of student teaching. Please make a copy of your application packet before you submit it.
 All submitted items become a part of the candidate file and can not be returned or photocopied once submitted.
- Your MSTEP II application for a Clinical Practice placement will be considered by the Multiple Subject
 Committee during the sixth or seventh week of the quarter in which it is submitted. If approved, you must
 begin Clinical Practice the following quarter (except summer) or you will need to reapply.
- Please see the checklist on page 3 to ensure that all requirements are met before submitting your MSTEP II application.

CLINICAL PRACTICE

- You may <u>NOT</u> make your own Clinical Practice placement arrangements! All placements are made by the
 University with schools that have signed a Memorandum of Understanding agreement. School placements
 are located between Orcutt and San Miguel, therefore, be advised that <u>at least one</u> of your placements
 may be 40-60 minutes away from your local residence.
- Please be aware of the amount of time involved in Clinical Practice. As a teacher candidate, you must <u>arrive on time and cannot leave early</u> from your placement responsibilities. In addition, you are required to meet with your Cooperating Teacher at the end of the official school day during your Clinical Practice III experience. As you create your schedule, please keep in mind the amount of time you will need to travel to your school site, lesson planning, and conferencing with your Cooperating Teacher and Clinical Practice University Supervisor to make the most of your experience.
- When your placement has been confirmed, you will be notified via your <u>Cal Poly email ONLY</u>. Please make sure you have appropriately set up your Cal Poly email account to forward all emails, if you choose.

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ORIENTATION MEETING

• You are required to attend an orientation meeting with your Clinical Practice University Supervisor to review key aspects of your CPII or CPIII assignment. You will receive notice of the time and location for this orientation via Cal Poly email.

SPECIAL CONSIDERATION FOR MEDICAL OR PHYSICAL LIMITATIONS

• If you are asking for a special Clinical Practice placement assignment because of a medical or physical limitation, <u>documentation is required.</u> Special placements may be given to a candidate who has a medical and/or physical limitation, but the candidate must explain the limitation <u>in writing</u> on the MSTEP II application form under "Special Notes."

RELEASE OF INFORMATION

- Your placement as a Teacher Candidate in an area school requires the School of Education to release your name and phone number to the appropriate district. Please contact the Credential Office (805-756-2126) if release of such information should not occur.
- Additionally, as part of our accreditation with the California Commission on Teacher Credentialing, the School of Education is required to maintain and provide records of all Teacher Candidates and each placement in which they participate.

WITHDRAWAL FROM CLINICAL PRACTICE OR MSTEP PROGRAM

• If you must withdraw from any Clinical Practice assignment (EDUC 454 or EDUC 456) or withdraw from the program for any reason, please contact the Multiple Subject Coordinator (805-756-2126) as soon as you make this decision. In addition, you will need to notify the Credential Office of your decision by email.

PLEASE MAKE A COPY OF YOUR APPLICATION PACKET BEFORE YOU SUBMIT IT. ALL SUBMITTED ITEMS BECOME A PART OF THE CANDIDATE FILE AND WILL NOT BE RETURNED OR PHOTOCOPIED ONCE SUBMITTED.





STEP II Program Application Checklist (MSTEP)

	LAST NAME	FIRST NAME	MI	EMPL ID
MST	TEP II packets should include the follow	wing materials <u>in the or</u>	der listed belo	<u>w</u> :
	MSTEP II Checklist - Page 3			
	MSTEP II Application for Clinical Pra	actice - Page 4		
	Clinical Practice Assignment and R	elease Form - Page 5		
	☐ Documentation of medical or ph	ysical limitations (check	(if applicable)	
	RICA Examination - Attach evide Competence Assessment prior to www.rica.nesinc.com for details).	•		<u> </u>
	GPA - All Teacher Candidates must m Professional Education Coursework ta falls below 3.0 in any quarter, it is you next steps. Unless otherwise instruct grading. Please sign that you understa	ken prior to, and during, ır responsibility to conta red, <u>DO NOT</u> take an	your Clinical P act the Multiple EDUC prefixed	ractice experiences. If your GPA Subject Coordinator to discuss

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MSTEP II - APPLICATION FOR CLINICAL PRACTICE

NAME:		
(First)	(Middle)	(Last)
SSN*	Date of Birth	EMPLID
ADDRESS:		
CITY:	STATE:	ZIP:
LOCAL PHONE:	PHONE: CELL PHONE:	
CAL POLY EMAIL (A Cal Poly email address is red	guired. No email will be sent to persona	@CALPOLY.EDU al Gmail. vahoo, Hotmail, etc.)
_	utomatically sought for your net quarte arter, you <u>MUST</u> notify the School of Eu	
consecutive quarters (excluding sum completing the full Clinical Practice e	e if you were unable to complete your C mer) or if you withdrew from the progra experience. Please use the form below s, you must submit a new CalStateAppl	am for any reason before to re-apply. If you have not
I AM RE-APPLYIN	NG FOR CLINICAL PRACTICE (STUDE	NT TEACHING)
I wish to resume Clinical Practice	in: ☐ Fall ☐ Winter ☐ S	Spring Year:
I need to complete Clinical Practic	ce assignment in: ☐ EDUC 454 (8 ur	nits)
Approved by Multiple Subject Co	ordinator:	Date:





CLINICAL PRACTICE ASSIGNMENT AND RELEASE FORM

LAST NAME	FIRST NAME	MI	EMPLID
All of your Clinical Practice assignme staff. You are <u>NOT</u> allowed to make	_		•
A number of factors will influence the and reading instruction requirements should have significant exposure t schools," including: race and ethnic ranges, English learners from a va	s. Per the California Commisto school settings that restity of students, students fro	ssion on Teac flect the full om families ir	cher Credentialing, "Candidates I diversity of California public n lower socio-economic income
disabilities. This is a CTC requirem Accordingly, SOE faculty work diliger to work with English learners (ELD lew and developmental diversity.	nent for all Teacher Cand ntly to locate at least one pla	lidates prepa acement whe	ared in the state of California. ere you will have the opportunity
The following is a list of school district Guadalupe*, Lucia Mar*, Orcutt*, Pa Templeton. Districts indicated with a learners and student diversity than no for at least one of your Clinical Practic	aso Robles*, San Luis Coa star (*) typically offer candi n-starred districts. Please be	astal, San Mi dates more o	iguel*, Santa Maria-Bonita*, and opportunities to work with Englisl
 SPECIAL NOTES If you have a family responsibility, influence your ability to participat your special need and (b) indicate special consideration, the SOE wi school district you have indicated Please note that medical conditio If, for any reason, you decide to d placement for the next quarter in 	te in your placements, pleas es a preferred school distric ill try to place you (for at lea l. We can not accommodate ons require a supporting lett lecline your assigned placer	se include a bet. If your circust one Clinicale requests for ter from your ment, you will	orief statement that (a) explains umstances are found to warrant all Practice assignment) in the r a specific school or teacher. doctor. I be allowed to request another

RELEASE OF INFORMATION

By signing below, you authorize the School of Education to release your name, phone number, and any other requested information to the appropriate district and to the California Commission on Teacher Credentialing.

Signature of Candidate:	<u> </u>	Date:
Printed Name:		EMPL ID: