

CSULB Education Specialist Clear Credential Individual Development Plan (IDP)

Background Information

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| Candidate's Name: | Semester Student Teaching Completed: | |
| Address: | Date Filed Education Specialist Preliminary Credential: | Preferred Phone: |
| University Attended for Education Specialist Preliminary Credential: <i>CSULB (California State University, Long Beach)</i> | <input type="checkbox"/> Passed TPA 2.0 Cycle 1 <input type="checkbox"/> Submitted and Awaiting Scores for TPA 2.0 Cycle 1 <input type="checkbox"/> Passed TPA 2.0 Cycle 2 <input type="checkbox"/> Submitted and Awaiting Scores for TPA 2.0 Cycle 2 <input type="checkbox"/> Passed Reading Instruction Competency Exam (RICA) <input type="checkbox"/> Taken and Awaiting Scores for RICA <input type="checkbox"/> Other: _____ | |
| Credential Specialization Area/Authorization: _____ | | |
| Transcripts attached? (Credential Program) ___ Yes ___ No | | |
| All Test Scores attached? ___ Yes ___ No | | |

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| Student Teaching Setting Placement Site/ Grades/ Setting: Service Delivery Model/s, Subject Areas, Traditional or Intern: |
| <i>As a special education teacher, identify areas that you would like to develop further that are linked to Developing as a Professional Educator</i> Specific Developing as a Professional TPEs that you would like to develop further: <ul style="list-style-type: none"> • <input type="checkbox"/> • <input type="checkbox"/> |
| <i>Identify specific Teacher Performance Expectations for Special Education (#s 1-5) that you would like to develop further Engaging and Supporting Student in Learning, Creating Maintaining Effective Environments, Understanding and Organizing Subject Matter, Planning and Designing Learning Experiences, Assessing Student Learning)</i> Specific skills from the Special Education Teacher Performance Expectations that you would like to develop further: <ul style="list-style-type: none"> • <input type="checkbox"/> • <input type="checkbox"/> |

Professional Goals

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| Using the information above, write specific goals and steps/s for achieving these during your Clear Induction: Goal 1: Goal 2: Goal 3: |
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I have received a copy of this IDP and understand it is my responsibility to maintain the document and provide to an employer upon entry to an Induction Program.

Candidate Signature _____ Date _____ University Supervisor _____ Date _____
 Cooperating Teacher: _____ Date _____