



University of Houston-Clear Lake
School of Education

Request for Reading Practicum

Fall 20____ Spring 20____ * Summer 20____
Fall Deadline – June 1 Spring Deadline – October 1 Summer Deadline – March 1

_____ Undergraduate Students – LLLS 4739 - *Practicum in Clinical Reading*

_____ Graduate and Post-Degree Certification Students – LLLS 6639 – *Leadership in Clinical Practices in Assessment of Literacy Tasks*

*** Summer Practicum Students:** June (5 weeks)

Date: _____ SSN _____ Student ID _____

Name: _____

Address: _____

City/State/ZIP: _____

E-Mail Address: _____

Daytime Phone: _____ Other Phone: _____

I will have completed 12 semester hours of LLLS (Reading) coursework, including the appropriate prerequisites, by the end of the semester prior to the practicum.

Indicate semester you completed (or will complete) the following prerequisite courses:

Undergraduate:

Sp Su 1 Su 2 Fa _____ LLLS 4133 – *Corrective and Remedial Reading* AND

Sp Su 1 Su 2 Fa _____ LLLS 4332 – *Diagnostic & Prescriptive Reading*

Graduate

Sp Su 1 Su 2 Fa _____ LLLS 6732 – *Assessment and Remediation of Reading and Language Arts Literacy Tasks*

I plan to graduate (or apply for certification) at the end of _____ semester, 20_____.

Student signature: _____

*Completed requests should be returned to Bayou 1231 on or before the above deadlines.
Please call the School of Education at (281) 283-3600 with questions.*