University of Houston-Clear Lake
School of Education

Request for Reading Practicum

<table>
<thead>
<tr>
<th>Fall 20___</th>
<th>Spring 20___</th>
<th>* Summer 20___</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall Deadline – June 1</td>
<td>Spring Deadline – October 1</td>
<td>Summer Deadline – March 1</td>
</tr>
</tbody>
</table>

_____ 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.