NEIU ~ DANIEL L. GOODWIN COLLEGE of EDUCATION
READING TEACHER ENDORSEMENT APPLICATION

Reflective ∞ Collaborative ∞ Transformative

THIS FORM IS ONLY FOR CANDIDATES WHO WANT TO ADD A SUBSEQUENT READING TEACHER ENDORSEMENT

Name:		**DOB(MM/DD/YY):**
(Last) **(First)** **(M.I.)**		
E-Mail: **@neiu.edu**	**Student Phone: ( )**	
Advisor:	**NEIU ID:**	**IEIN (ELIS Account #):**
Anticipated Date of Graduation (Mark One): ☐ **FALL** ☐ **SPRING** ☐ **SUMMER**		**YR: 20___**

For Dean's Office Use Only	
Evaluator:	**Date:**
Program: Reading Teacher	
Endorsement completed: Mark One: **YES** ☐ **NO** ☐	

Distributions in Reading Teacher (PK-12)

Reading Teacher (177) or Reading Specialist (176) test; and 18 semester hours of college-level coursework addressing each of the following areas specific to or inclusive of the middle grades:

Areas	**Courses Graduate Level**
Foundations of reading	LTCY 501
Content area reading	LTCY 502
Assessment and diagnosis of reading problems	LTCY 507
Developmental and remedial reading instruction and support	LTCY 508 AND 510
Developmental and remedial materials and resources	LTCY 508 AND 510
Literature appropriate to students across all grade ranges	LTCY 504
Reading practicum	LTCY 508 AND 510

For Office Use Only: TOTAL Hours & Initial Approval

ENDORSEMENT AREA: Reading Teacher(PK12) Mark Content Test passed: ○ 177 or ○ 176
Date passed : _____

COURSE PREFIX and NUMBER	**COURSE WAS TAKEN AT:(Name of Institution)**	**COMPLETED TERM / YEAR**		**GRADE**	**CREDIT HOUR**