



EARLY CHILDHOOD SPECIAL EDUCATION ENDORSEMENT
 NORTH DAKOTA EDUCATION STANDARDS AND PRACTICES BOARD
 SFN 58892 (07-2011)

ND Educator's Professional License Number

Social Security Number (no dashes)

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or

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Last Name, First Name, MI				Maiden Name			
Address							
City			State		Zip Code (9-digit)		ND College Student ID
Home Telephone Number		Work Telephone Number		Date of Birth		Email Address	
High School Graduated (Name)		High School Graduated (Year)		High School Graduated (City)		High School Graduated (State)	

Prerequisite: Valid North Dakota educator's professional license in early childhood or elementary education.

Plan on File Prerequisites:

- 1) Letter from your administrator requesting this endorsement along with the name of your special education mentor.
- 2) Transcript documenting three semester hours (SH) of special education coursework.
- 3) Documentation of enrollment in an institution of higher education for two additional courses specific to early childhood special education, regardless of how many hours already transcribed in special education.

Plan on File Timeline: This endorsement must be completed within three years of assignment to teach early childhood special education. A transcript review will be done annually to document your progress toward completion of this endorsement.

Fees: \$75 fee if adding this endorsement between license renewal periods. There is no additional fee to add this endorsement at license renewal time.

Early Childhood Special Education Program of Study

22 semester hours of transcribed core coursework primarily at the graduate level from approved teacher education program.		
Coursework	Completed (SH)	Needed (SH)
Children with exceptional learning needs		
Assessment of students with disabilities/special needs or Assessment of young children		
Behavior management of students with disabilities		
Legal aspects of special education		
Consultation and collaboration		
Characteristics/introduction of young children with disabilities		
Methods and materials of young children with disabilities		
Development of young children including domains of social and emotional cognition, language and literacy, and physical and adaptive		
2 SH practicum/internship in early childhood special education		
	Total SH	Total SH
Documentation of enrollment in coursework for two additional early childhood special education courses (see Plan on File Prerequisite 3 above)		
Administrator letter (see Plan on File Prerequisite 1 above)		
Name of Mentor (see Plan on File Prerequisite 1 above)		

Signature of Applicant	Date
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ESPB Review	Date
Executive Director, ESPB	Date

License Code 19037	Type of Equivalency 23	Level of Preparation 15
Plan on File Start Date:	Plan on File Expiration Date:	Plan on File Effective Date:

Submit completed form and \$75 fee to: Education Standards and Practices Board
2718 Gateway Ave, Suite 303
Bismarck ND 58503-0585
(701) 328-9641 office
(701) 328-9647 fax

In compliance with the Federal Privacy Act of 1974, the disclosure of the individual's social security number on this form is mandatory pursuant to North Dakota Century Code (NDCC) 43-50-02. The individual's social security number is used by the Education Standards and Practices Board (ESPB) as an identification number for file control purposes, background checks, and recordkeeping. ESPB does not advocate, permit, nor practice discrimination on the basis of sex, race, color, national origin, religion, age or disability as required by various state and federal laws.

Payment/Credit Card Information

This documentation will be destroyed upon completion of processing.

Type of Payment <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Check		Amount \$
Name as it appears on credit card		
Credit Card Number	Expiration Date	3 digit CVV number (on back of card)
Billing Address of credit card (if different than the mailing address)		