

Candidate Name _____

NU ID _____

UNO Advisor _____



UNIVERSITY OF NEBRASKA AT OMAHA
COLLEGE OF EDUCATION,
HEALTH, AND HUMAN SCIENCES

Graduate Endorsement Recommendation

Choose one in this section:

___ Master's Degree (graduation date _____)

___ Endorsement Only

Choose one in this section:

___ Special Education – Behavior Intervention Specialist (18 Hours – NO Praxis required) PK - 6 **OR** 7-12

___ Special Education – Behavior Intervention Specialist (33 Hours) PK - 6 **OR** 7-12

___ Special Education – Generalist (30 Hours) K - 6 **OR** 7-12

___ Speech Language Pathology B-21

Placement Information:

Internship/Practicum Site: _____

University Supervisor: _____

Grade Level: _____

Number of Students: _____

Complete this section:

___ Completed Praxis II Content Test

___ Praxis II Test Score: _____

Signature _____ Date _____
(UNO advisor)

Signature _____ Date _____
(UNO department chair)

Please return this form (with **two** signatures) to the Certification Assistant in RH204. Thank you!