

APE Summer Program



Dear APE Student,

Thank you for your interest in the Adapted Physical Education (APE) Program at CSU, Chico.

Applicants pursuing the added APE authorization must hold a bachelors' degree as well as a credential, such as a Single Subject credential in Physical Education, a Multiple Subjects credential, or a current Preliminary Education Specialist credential. Additional requirements may be required for individuals whose undergraduate work is NOT in physical education. Applicants must meet subject matter competency for physical education via a degree in PE, PE coursework, or the CSET for physical education.

Enclosed you will find the following items:

- ☑ Application for the APE Authorization Summer Program.
- ☑ Student Objectives and Responsibilities.

Please submit the Application directly to Dr. Rebecca Lytle. Please contact me if you have questions or to determine specific course requirements at (530) 898-4298.

Sincerely,

Rebecca K. Lytle, Ph.D.
Program Director



Adapted Physical Education Program
California State University, Chico
Dr. Rebecca Lytle, Program Director

E-mail: rytle@csuchico.edu

Phone: 530-898-4298



APE Summer Program

To apply for the APE Authorization Summer Program, submit a complete application package as soon as possible.

Checklist for a Complete Application

- ___ Form A: Application for APE Authorization Summer Program
- ___ Form B: Applicant Data Survey
- ___ A typed letter of application (2 pages maximum) which addresses your career goals, including your experience working with individuals with disabilities.
- ___ One official transcript of all college work
- ___ Information for three references (Name, Job Title, Phone, Email Address)
- ___ Two letters of recommendation, from two of the three references above
- ___ **Priority Deadline January 31st. Final Deadline May 1st.**

Deliver or mail complete TIER application materials to:

Rebecca Lytle, Ph.D.
APE Program, Kinesiology Department
CSU, Chico
Chico, CA 95929-0330

Phone: (530) 898-4298
Email: rlytle@csuchico.edu

Please keep this page for your records.





Application for APE Summer Program

Name _____ Date _____

Street Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____ Cell Phone _____

Date of Birth _____

Email address _____

Employment

Place of Employment _____

Employment Address _____

Position _____ Supervisor _____

Do you currently have a credential to teach in California? Yes No

If yes, name of credential(s): _____

Do you currently have a credential to teach in another State? Yes No

If yes, which state and which credential(s): _____

Are you currently working as a teacher? Yes No

If yes, please describe): _____

Are you bilingual? Yes No If so, which language(s) _____

Education

<u>College/University</u>	<u>Course of Study</u>	<u>Completed Units</u>	<u>GPA</u>	<u>Degree Earned</u>
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Applicant Data Survey

We consider all applicants without regard to race, color, religion, creed, gender, national origin, age, mental or physical disability, marital or veteran status, sexual orientation, or any other legally protected status. Completing this survey is *strictly voluntary*.

Your cooperation is appreciated.

Name _____ Telephone _____
Last First Middle

Address _____
Number, Street, Apt City State Zip Code

Referral Source(s)

- Advertisement in (name) _____ Conference _____
 Referred by (name) _____ Other _____
 Web site _____

Equal Employment Opportunity Identification Groups

Date of Birth: _____ Please check one: Male Female
(Month/Day/Year)

Please check one: Caucasian African Hispanic Asian/Pacific Islander
 American Indian/Alaskan Native Other _____

Please check if any of the following are applicable:

- Vietnam Era Veteran Veteran with a Disability
 Individual with a disability Re-entry student

I understand that I'm providing this information voluntarily and it will be kept strictly confidential.

Signature _____

Date _____

California State University, Chico
Chico, CA 95929-0330
Adapted Physical Education Program
Dr. Rebecca Lytle, Project Director

E-mail: rlytle@csuchico.edu
Phone: 530-898-4298



APE Authorization Summer Program

Student Responsibilities

1. Notify Dr. Rebecca Lytle, program director of the APE Program, of all changes in address. rlytle@csuchico.edu
2. Maintain satisfactory progress toward the degree.
GPA requirements: GPA 3.0 in each course.
3. All students are expected to attend all classes, demonstrate model academic behavior, be independent thinkers and learners, and be punctual and professional in all interactions with parents, children, peers, and community programs.
4. Add candidates are expected to complete KINE 617 field experience at the completion of all other coursework. This course requires working with students teaching APE in a school setting. Student must complete a minimum of 5 hours per week for the duration of one semester to complete this class. Please discuss this requirement with the advisor if you have questions.