INITIAL THREE-WAY CONFERENCE
EDUCATION SPECIALIST - ADD-ON CREDENTIAL

School Site: Setting: Mild/Mod or Extensive Support
Candidate: Grade Level(s):
LST: University Supervisor:
Meeting Date:

Present at the meeting: ______________________________________________
Candidate Signature: ________________________________________________
Local Support Teacher Signature: _______________________________________
University Supervisor Signature: _______________________________________

A summary of meeting tasks follows:

☐ The purpose, structure, policies and procedures of the Education Specialist Credential
Program were reviewed and each member received access to the Education Specialist
Credential Program Handbook, supervisory forms and evaluation rubrics.

☐ Goals that the candidate and CT would like to focus on during practicum:
  ● Assessment:
  ● Behavior:
  ● Curriculum:
  ● Other:

☐ Goals and actions for participation in teaching of reading/language arts.

<table>
<thead>
<tr>
<th>GOALS</th>
<th>ACTION</th>
</tr>
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<tbody>
<tr>
<td>READING:</td>
<td>Candidate will….</td>
</tr>
<tr>
<td>WRITING:</td>
<td>Candidate will….</td>
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</tbody>
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**OBSERVATION (other grade level):**

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<tr>
<th>Candidate will…</th>
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- The candidate has attended a faculty meeting. Yes ☐ No ☐

- The following program forms were reviewed with LST and Candidate:
  - ☐ Education Specialist Credential Program Handbook
  - ☐ CORE Rubric & Observation
  - ☐ SOE Professional Dispositions Rubric
  - ☐ TPE Rubric

Follow-up or additional comments: ____________________________________________
____________________________________________________________________________
____________________________________________________________________________

Next scheduled visit: _______________________________________________________

**Copies of this form are to be provided to the LST and University Supervisor!**