

## CERTIFICATION FORM Spoken Communication Requirement for a Teaching Credential

To be filled out by the student and presented to the professor before the speech:

Student Name:		ID Number:			
Program Location: Cerritos	Main Campus High Desert	Bakersfiel Newhall		entral Coast Ventura	
Semester/Term:	Fall Winter	Spring	Summer	Year_	
Course Number and Ti	itle:				
Name of Professor:					
Subject and/or Title of	Presentation:				
Date of Presentation: _	A	Approximate Lea	ngth of Presenta	tion:	
Note to student: Two cer	tification forms of spoken communi	ication competenc	e are required (or	e speech per course	<del>:</del> .)
To be completed by the	he professor:				
Please rate:		Excellent	Satisfactory	Unsatisfactory	Very Poor
1. Student's knowledge of subject matter presented.					
2. Organization of pres	sentation.				
3. Clarity of argument.					
4. Voice quality, clarity, and projection.					
5. Appropriateness of l	length ( minutes).				
6. Lack of distracting phrases, gestures, mannerisms.					
7. Overall effectiveness of the speech.					
8. Overall effectiveness of the speaker.					
Comments:					
Based on the criteria a	bove, I certify that the student ha	as demonstrated	competence in s	noken communic	ation of the
	lifornia Teaching Credential:		NO	ponen commune	ation of the
Signed:Professor			Date:		
Note to Professor: Plea oral presentation.	ase return this certification form  White: Student		Deparment imr  Education Dept.	nediately after the	student's
	Willie. Studellt	Canary: 1	Education Dept.		