



Academy of
Orton-Gillingham
Practitioners
and Educators

P.O. Box 234
4950 Route 22, Suite 8
Amenia, NY 12501

Tel. (845) 373-8919
Fax (845) 373-8925
ortonacademy@verizon.net

ASSOCIATE APPLICATION

Since members of the Certifying Committee most likely do not know you or know of your experience, please provide as detailed information as is possible for their review. Also, please note that application forms and materials submitted to the Academy will not be returned.

I. Contact Information

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

E-mail _____ Cell Phone _____
(for renewal and other notices)

Note: Academy members' contact information, including e-mail addresses and home phone numbers, will published in the Academy Membership Directory unless Academy staff members are instructed otherwise.

II. Academic History (Begin with Highest Degree)

Degree _____ Institution _____ Date _____

Degree _____ Institution _____ Date _____

Degree _____ Institution _____ Date _____

Other academic credits/education/ certifications other than Orton-Gillingham training.
Use a separate sheet, if necessary.

III. Orton-Gillingham Training Option A: for Instructors of Individual Students (1:1)

Course work, total hours, _____, based on the Academy curriculum at the Associate Level, Option A from (date coursework began) _____ to (date coursework completed) _____.

Supervised practicum, total hours, _____, based on the Academy guidelines at the Associate Level, Option A from (date practicum began) _____ to (date practicum completed) _____.

Observations (on-site or video), **at least 10 entire and, if videoed, unedited lessons** (40 to 60 minutes each) _____ by a Fellow, based on the Academy guidelines at the Associate Level, Option A.

Principal training Fellow _____ Institution(s) _____

Address _____ City _____ State _____

Orton-Gillingham Training Associate Level Option B: for Group or Classroom Instructors

Course work, total hours _____, **including 10 hours of application to group or classroom instruction** based on the Academy curriculum at the Associate Level, Option B from (date coursework began) _____ to (date coursework completed) _____.

Supervised practicum, _____ hours of one-on-one and _____ **hours of group or classroom instruction** based on the Academy guidelines at the Associate Level, Option B from (date practicum began) _____ to (date practicum completed) _____.

Observations (on-site or video) **with at least 10 entire and, if videoed, unedited lessons, including 5 observations of teaching 1:1 and 5 observations in a group or classroom setting** (40 to 60 minutes each), _____ one-on-one instruction and _____ group or classroom instruction, that were observed by a Fellow, based on the Academy’s guidelines at the Associate Level, Option B.

Principal training Fellow _____ Institution(s) _____

Address _____ City _____ State _____

IV. Related Training—Programs derived from Orton-Gillingham, such as: Alphabetic Phonics, Herman, Project Read (Enfield & Greene), Slingerland, Spalding, Wilson, and others.

Program	Hours	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

V. Conferences/Workshops. Please include dates. Use a separate sheet if necessary.

VI. Orton-Gillingham Tutoring Experience

List current supervising Fellow _____

List teaching/tutoring as an Orton-Gillingham practitioner: Total Years _____ Months _____

Site (Home, Institution, Private Practice) _____ Dates _____

How often each week: _____ Number of students (1:1) _____ Age range _____

Number of students (group/classroom) _____ Age range and Grades _____

VII. Complete vita.

VIII. Brief statement including any additional information which might support your application.

IX. Orton-Gillingham Lesson Plans with Profile.

Submit either Option A for 1:1 lessons or Option B for group or class lessons.

A. For one student, submit one annotated lesson plan for that student and photocopies of the lesson plan that preceded it and the lesson plan that followed it, so that the committee reviewing the application can get a sense of continuity as it relates to scope and sequence and diagnostic and prescriptive practice. Copies of work done by the student during all three lessons are to be included.

OR

B. For one group or class, submit one annotated lesson plan for that group and photocopies of the lesson plan that preceded it and the lesson plan that followed it, so that the committee reviewing the application can get a sense of continuity as it relates to scope and sequence and diagnostic and prescriptive practice. At least one example of work done by a student during all three lessons is to be included.

For Both A or B

The Profile is to include:

- A personal description of the learner(s), including age(s)
- Information about the learner's cognitive functioning
- Information about the learner's academic achievement, including grade
- A sequence of Orton-Gillingham elements **and** the approximate number of lessons taught prior to the lesson submitted
- The scheduled length in minutes of each lesson **and** the scheduled frequency of lessons.

The Lesson plans must state a clear teaching objective based on the specific needs of the learner(s) described in the profile and:

- Are detailed, specific, and prescriptive
- Include specific phonemes, graphemes, words, and sentences to be used
- Explain how you teach each section of the lesson, and
- Include accompanying student written work for one student from **each** lesson (workbook pages are not appropriate)
- Include the date of the lesson **and** the number it is in the series of lessons for the student(s).

X. Letters of support from two persons, written using the required "Letter of Support" form the Academy provides for this purpose; the form may be obtained from the Academy website or office. One letter must be from your principal training Fellow. The second letter should be from someone who is familiar with your work as an Orton-Gillingham practitioner. Those providing support letters should be asked to send them directly to the Academy. It is your responsibility to see that the required forms are used and are received by the Academy office by the deadline.

The Academy should expect to receive recommendation forms from:

1) _____
Last Name First Name

2) _____
Last Name First Name

Be sure to submit:

- **Original application together with a copy of ALL supporting documentation.**
- **Eleven (11) complete copies of the application and ALL supporting documentation. (This totals 12 full documents –the original and 11 copies; the Academy suggests you make an extra copy to keep for your records.)**
- **Checklist to be completed and sent along with application; checklist is found on the Academy website in the “Certification Program” section.**
- **Application fee for Associate Level of \$175 (*which includes a \$60 nonrefundable fee*), payable to the Academy of Orton-Gillingham Practitioners and Educators.**



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Your Name _____

Are you the applicant's Principal Training Fellow? [] Yes [] No

If no, are you an Academy Member? [] Yes - Level of Membership _____ [] No

PART I

Name of Applicant _____

Address of Applicant _____

The Applicant has satisfactorily completed:

Coursework Hours

- Associate Level _____ Number of Coursework Hours
Certified Level _____ Number of Coursework Hours
Fellow Level _____ Number of Coursework Hours

Supervised Practicum Hours

Please note observations (on-site or video), must be entire and, if videoed, unedited lessons (40-60 mins each).

- Associate Level: _____ Number of Hours _____ Number of Observations _____ Additional Hours of Observation
By [] Me [] Other Academy Member who is at the _____ Level of Membership
Certified Level _____ Number of Hours _____ Number of Observations _____ Additional Hours of Observation
By [] Me [] Other Academy Member who is at the _____ Level of Membership
Fellow Level _____ Number of Hours _____ Number of Observations _____ Additional Hours of Observation
By [] Me [] Other Academy Member who is at the _____ Level of Membership

Required Reading

The applicant has completed the required reading at the: [] Associate Level [] Certified Level [] Fellow Level

PART II

Please state your professional relationship to the applicant: _____

The Certifying Committee of the Academy of Orton-Gillingham Practitioners and Educators would appreciate your professional judgment regarding the qualification of this candidate. Please rate the applicant on the following attributes:

ATTRIBUTE	EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	UNABLE TO RATE
O-G Knowledge					
Teaching Skill					
Diagnostic Ability					
Prescriptive Ability					
Academic Ability					
Time Management					
Judgment					
Communication:					
Oral					
Written					
Ability to Work w/:					
Students					
Colleagues					
Other Trainees*					

*For Fellow Applicants Only

Please add any information that you feel would be helpful to us in considering this applicant:

Please check one:

- I strongly recommend this applicant at the _____ level.
- I recommend this applicant at the _____ level.
- I cannot recommend this applicant.

Signature _____ Date _____

Please fully complete this form; otherwise this candidate’s application will be considered incomplete.

RETURN RECOMMENDATION FORM DIRECTLY TO THE ACADEMY OFFICE:

**AOGPE
P.O. BOX 234
AMENIA, NY 12501**

C H E C K L I S T

Please Complete & Include With Your Application for Associate, Certified or Fellow Membership to the Academy

This checklist will help you in preparing a complete application and will assist the Academy in its review of your application. Please write "yes" before each item that applies to you and send this checklist along with your application. It is important for you to know that for the Academy Fellows who review membership applications, the documentation requested is essential. Thank you in advance for your cooperation.

- _____ all information requested on the **most recent** application form downloaded from the Website (ortonacademy.org).
- _____ letters of support from two persons using the required "Letter of Support" form the Academy provides for this purpose; these can be obtained from the Academy website or office. One letter must be from my principal training Fellow; the second should be from someone who is familiar with my work as an Orton-Gillingham practitioner. Those providing support letters should be asked to send them directly to the Academy. It is my responsibility to see that the required forms are used and are received by the Academy office by the deadline.
- _____ college degree(s): at least a Bachelor's Degree for Associate and Certified, and a Master's Degree or equivalent for Fellow.
- _____ a minimum of 60 hours of O-G coursework with an Academy Fellow for Associate Practitioners; an additional 10 hours (totaling 70 hours of course work) with an Academy Fellow for Associate Group/Classroom Practitioners; an additional 100 hours (totaling 160 hours of coursework) for Certified; and an additional 90 hours (totaling 250 hours of coursework) for Fellow.
- _____ supervised practicum hours teaching one-on-one: 100 hours for Associate over a period of 8 months to 1 year; Group/Classroom Practitioners, (may be 100 hours of 1:1 or 50 hours of 1:1 and 50 hours of group/classroom): an additional 200 hours (totaling 300) for Certified over a 2- year period; and an additional 300 hour (totaling 600 hrs.) for Fellow with a minimum of 6 years of experience as a practitioner.
- _____ observations (on-site or video), entire and, if videoed, unedited lessons (40 to 60 min. each), by a Fellow, based on Academy guidelines: 10 hours for Associate (10 hours **or** 1:1 or 5 hours of 1:1 and 5 hours of group/classroom) and 10 hours (totaling 20 hours) for Certified. For the Fellow, documentation that shows I have been observed while teaching coursework at the Associate and Certified levels and while supervising Academy candidates.
- _____ all related Orton-Gillingham training under that title on the application form.
- _____ all Conferences and Workshops attended under that title on the form.
- _____ all experience as an Orton-Gillingham Practitioner.
- _____ an up-to-date Vita.
- _____ a brief statement that includes my reason for applying along with additional information I want the Reviewing Committee members to consider.
- _____ verification by my Fellow that I have completed all of the required reading.

I have listed, included, or documented:

With my lesson plan(s) I have included:

<p>_____ all information for the Student Profile(s) requested on the application</p> <p>_____ each lesson presented with the lesson number and the date it was given clearly shown on each page.</p> <p>_____ a listing of all the language concepts introduced prior to the lessons submitted.</p> <p>_____ work-papers that demonstrate all aspects of drills, concepts, skills, and other procedures appropriate in an O-G lesson whether the student is at a lower or advanced level of instruction.</p> <p>_____ copies of <u>all</u> materials used during the lesson; reading lists, content reading, teacher designed worksheets, etc. (References to materials such as "see Such and Such...page 15" are unacceptable);</p> <p>_____ written comments on the lesson plan or the student's work-papers about "why I did what did" with the student during the O-G lesson.</p>

As an Associate Applicant I have included all items listed above as well as the following:

<p>_____ three lesson plans and a profile for one student: a pre-lesson, my annotated lesson (explaining in depth what I did and how I did it, and the student's response), and the follow-up lesson</p> <p>OR three lesson plans and a profile for a group: a pre-lesson, my annotated lesson (explaining in depth what I did and how I did it, and the students' responses), and the follow-up lesson.</p> <p>_____ all work-papers created by the student(s) during all three lessons (note: a reference that the student did the written work on a chalk board or in a certain commercial publication is unacceptable for the submitted lessons);</p> <p>_____ as appropriate, evidence of instruction with syllable types and syllable division patterns including the steps used to provide review and practice with these concepts;</p> <p>_____ discussion of the procedures used for the student's "error repair" with examples included on the student's work-papers;</p> <p>_____ appropriate notations of student responses on the lesson plans or the student's work-papers to help in planning the next lesson(s).</p>
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As a Certified Applicant I have included all items listed above under "with my lesson plan(s)" as well as:

<p>_____ two annotated lesson plans and profiles; one profile and lesson with a student at the lower level of language instruction and one profile and lesson with a student at a higher level of language instruction;</p> <p>_____ all work-papers created by the student during each lesson (note: references to chalk board or white board writing is not acceptable for the submitted lessons)</p>

As a Fellow Applicant:

I have included all items listed above under “with my lesson plan(s)” as well as:

Who is currently a Certified Member, I have included:

- _____ one annotated lesson plan and a profile for an advanced student; that meets all the criteria specified above under the applicant checklist for both Associate and Certified lesson plan(s).
- _____ all work papers created by the student during your lessons (note: references to chalk board and white board writing is not acceptable for the submitted lessons)
- _____ a detailed training syllabus that you have personally developed appropriate for a person involved in training teachers in the Orton-Gillingham approach.
- _____ a detailed lesson plan for a class that you would teach to your trainees in an Orton-Gillingham training course.

Who is not currently a Certified Member, I have included:

- _____ annotated lesson plans and profiles, for each of two students One lesson for a student working at the lower level of language instruction and one lesson for a student at a higher level of language instruction.
- _____ all work-papers created by each student during each lesson (note: references to chalk board and white board writing is not acceptable for the submitted lessons)
- _____ a detailed training syllabus that you have personally developed appropriate for a person involved in training teachers in the Orton-Gillingham approach,
- _____ a detailed lesson plan that you would teach to your trainees in an Orton-Gillingham training course.