

Teacher Education Program APPLICATION CHECK LIST

Applications to the Teacher Education Program are accepted during one of the following application periods: **February 1-15 and September 1-15.** LATE OR INCOMPLETE APPLICATIONS WILL <u>NOT</u> BE ACCEPTED. Please complete all required forms thoroughly and accurately. Questions regarding the application should be directed to the College of Education-Student Services Office, Eastburn Education Center (building # 27) room 101, (928) 523-2145, your Distance Learning Office, or your academic advisor.

Return the application to the College of Education-Student Services Office in Eastburn Education Center, Room 101, or mail to: College of Education-Student Services, NAU Box 5774, Flagstaff AZ 86011. Distance Learning students should return the application to their Distance Learning office.

COMPLETE APPLICATION PACKET INCLUDES:	
	☐ APPLICATION
A completed Application Form	☐ ADMISSION CHECK SHEET
A completed Admission Check Sheet	☐ STMT OF UNDRSTNDG
A signed Statement of Understanding	☐ PRIVACY FORM
• A signed Privacy Form	☐ FINGERPRINT CARD
• A copy of transfer transcripts (if applicable) If you have coursework from a college other than NAU, include those	☐ RECOMMENDATION
transcripts if the courses are not listed on LOUIE.	☐ TRANSCRIPTS (if applicable)
 A copy of your Fingerprint Clearance card The fingerprint clearance packet is available from the COE-Student Services Office or from the Distance Learning Offices. 	Received by:
• A completed Recommendation Form The enclosed Recommendation Form must be used. The Recommendation Form may be submitted separately, but must be received before your application can be processed.	Date Stamp:
A completed Curriculum Check Sheet (Distance Learning studies and Distance Learning studies	ures for the Teacher Education Program ar
 I confirm that I have received a copy of the Admission Requirements and Procedu understand that program admission is offered at the discretion of the College of E academic progress. (Please initial after reading) I confirm that the information provided in this application is true and correct to the documents submitted in support of the application are accurate and have not been reading) 	ne best of my knowledge and that the
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Teacher Education Program APPLICATION FORM

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Consumer Science [] Music-Choral [] Trade/Industrial Education								
CAMPUS OF ATTENDANCE (all applicants)								
[]Flagstaff Campus []Navajo/Hopi Statewide Program (circle one):								
[] Central AZ College Statewide Program (circle one): Chinle Ft. Defiance Ganado Kayenta								
Apache Junction Aravaipa Signal Peak Keams Canyon Page Tuba City []Eastern AZ Statewide Program (circle one): []Nogales Statewide Program								
Globe Payson Thatcher [] Northlands Statewide Program (circle one):								
[]Maricopa County Statewide Program: Holbrook IITV Whiteriver IITV Show Low								
List Location: [] Tucson Statewide Program []Mohave Statewide Program (circle one): []Yavapai Statewide Program (circle one):								
Bullhead City Kingman Lake Havasu City Prescott Verde Valley								
PROGRAM OPTIONS (Flagstaff Campus students ONLY)								
[]Traditional []Cohort beginning Fall OR Spring semester								
[]Cohort beginning Fall OR Spring semester								
[] Flagstaff Public School Based beginning Spring semester								



Teacher Education Program ADMISSION REQUIREMENTS AND PROCEDURES

Early Childhood, Elementary & Special Education Admission Requirements

- 1. Forty-five (45) semester hours of course work completed at the time of application to include:
 - **a.** ENG 105 or equivalent with a minimum cumulative GPA of 3.0
 - **b.** MAT 150 or equivalent with a minimum grade of C
 - c. MAT 155 or equivalent with a minimum grade of C
 - **d.** Two (2) lab science courses with a minimum grade of C in each course
 - **e.** EDF 200 or equivalent with a minimum grade of C
 - f. One of the following GPA requirements: 1) cumulative 2.5 GPA in liberal studies courses, OR 2) cumulative 2.5 GPA in all courses
- 2. A declared content emphasis or dual major (not required for Post Degree students).
- 3. A completed Recommendation Form (included with application) by someone who has directly observed your work with children or adolescents within the age group of pre-school through high school. The work experience may be either voluntary or paid but must have occurred in a structured setting for a minimum of fifteen hours. Acceptable recommendations may come from individuals who have observed your work as a camp counselor, swimming instructor, religious education instructor, volunteer in a classroom or another similar setting. Home child-care (baby-sitting, nanny) or peer-tutoring can not be used for the recommendation. Family and personal friends are not considered professional references. Professors can not be used as references unless they have directly observed your work with children or young adolescents.
- 4. Admission to Northern Arizona University.
- 5. A copy of fingerprint clearance card.
- **6.** Attendance at a Teacher Education Orientation. (Flagstaff campus students only)

Secondary Education Admission Requirements

- 1. Forty-five (45) semester hours of course work completed at the time of application to include:
 - **a.** ENG 105 or equivalent with a minimum cumulative GPA of 3.0
 - b. MAT 110 or MAT 114 or MAT 125 or an acceptable equivalent with a minimum grade of C
 - c. Completion of at least three (3) hours of content major course work
 - d. A minimum grade point average of 2.5 in all content major course work
 - e. EDF 200 or equivalent with a minimum grade of C
 - f. One of the following GPA requirements: 1) cumulative 2.5 GPA in liberal studies courses, OR 2) cumulative 2.5 GPA in all courses
- **2.** A declared major and minor or extended major.
- 3. A completed Recommendation Form (included with application) by someone who has directly observed your work with children or adolescents within the age group of pre-school through high school. The work experience may be either voluntary or paid but must have occurred in a structured setting for a minimum of fifteen hours. Acceptable recommendations may come from individuals who have observed your work as a camp counselor, swimming instructor, religious education instructor, volunteer in a classroom or another similar setting. Home child-care (baby-sitting, nanny) or peer-tutoring can not be used for the recommendation. Family and personal friends are not considered professional references. Professors can not be used as references unless they have directly observed your work with children or young adolescents.
- 4. Admission to Northern Arizona University.
- 5. A copy of fingerprint clearance card.
- 6 Attendance at a Teacher Education Orientation.

Admission Procedures

- Applications to the Teacher Education Program are only accepted September 1 15 and February 1 15.
- Incomplete applications will be returned to the student with no action taken.
- Students will be notified by mail regarding their admission status prior to early enrollment.



Teacher Education Program ADMISSION CHECK SHEET Early Childhood, Elementary, and Special Education

The information provided will be used to determine your eligibility for admission to the Teacher Education Program. The form must be completed accurately and fully. Completion of requirements will be verified using your transcripts.

NAME:	ID #:

TO BE COMPLETED BY THE STUDENT										
COURSE PREFIX & NUMBER	SEMESTER OR TERM	INSTITUION OF COMPLETION	UNITS EARNED	GRADE EARNED						

FOR OFFICE USE ONLY								
TERM		TERM	STATUS					
CMPLTD	IN	PLAN'D						
	Englis	h 105						
	35.55.50							
	MAT 150	and 155						
	Lab So	ience						
	EDF	200						
	Other C	Criteria						
CRITERI	A	YES/NO	STATUS					
45 hours								
2.5 GPA-	LS or cum							
Admitted t	to NAU							
Fingerprin	t card							
Recomme	ndation							
Teac								
ADMISSION DECISION								
STATUS	TERM	DATE						



Teacher Education Program ADMISSION CHECK SHEET Secondary Education

The information provided will be used to determine your eligibility for admission to the Teacher Education Program. The form must be completed accurately and fully. Completion of requirements will be verified using your transcripts.

NAME:			
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	TO RE COMPLETED BY THE STUDENT	1	FOR OFFICE LISE ONLY

TO BE COMPLETED BY THE STUDENT											
COURSE											
PREFIX & NUMBER	OR TERM	COMPLETION	EARNED	EARNED							
ENG 105 or equivalent with a minimum grade point average of 3.0											
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FOR OFFICE USE ONLY									
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	EDF	200							
	Major C	Cours s							
	Other C	Criteria							
CRITERIA YES/NO STATUS									
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Fingerprin	t card								
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Recommer	ndation								
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ADMISSION DECISION									
STATUS	TERM	DATE							



Teacher Education Program STATEMENT OF UNDERSTANDING

This document is to assist you in understanding your responsibilities as a student in the Teacher Education Program at Northern Arizona University. You must read and check each of the following statements.

ADVIS	EMENT						
	I understand that it is my responsibility to meet regularly with my advisor and to be aware of my program requirements at all times.						
STUDI	NT TEACHING REQUIREMENTS						
	I understand I must be fully admitted to the Teacher Education Program.						
	I understand I must have a cumulative grade point average (GPA) of 2.50 in all professional education courses, with no grade lower than a "C." I must also have an NAU cumulative grade point average (GPA) of at least 2.50.						
	I understand I must complete all content emphasis courses, with no grade lower than a "C." (Elementary and Early Childhood Education students ONLY)						
	I understand I must complete all education courses and all departmental requirements prior to student teaching.						
	I understand I must be approved for student teaching by College of Education faculty and/or faculty representatives of my major.						
	I understand all education coursework, with the exception of EDF 200, must not be older than 6 years at the time of student teaching.						
	I understand as a prospective student teacher, I must demonstrate social and emotional maturity consistent with professional standards of classroom instruction as well as physical health for teaching. If a serious question is raised through university classes, personal conduct or contact in the schools, the College of Education reserves the right to request an individual diagnostic evaluation (medical or psychological) prior to or during student teaching.						
I confirm I have read, understood, and checked each of the items listed above and that it is my responsibility to retain a copy of this document for my records. I am aware if I do not check each item my application to the Teacher Education Program will not be accepted.							
Print N	ame Signature Date						



Teacher Education Program PRIVACY FORM

I am

The Family Educational Rights and Privacy Act of 1974 and the Arizona Revised Statute 15-141 define your rights to privacy and the confidentiality of your records. Briefly, you have access to all academic reports and files, including testing results and teacher or counselor ratings and observations. This information cannot be released to school districts or to cooperating teachers without your written permission.

The College of Education-Student Services Office cannot obtain a fieldwork and/or student teaching placement for you until we have your permission to release specific information to the school. We will release the following information:

- your name
- your address and phone
- information about your major/minor, your preferences for placement, and your academic preparation for the placement

We will not release information about gender, age, or ethnic background. If the district requires additional information, or if Student Services must disclose additional information to complete a placement, you will be asked to approve the release of that information.

	d my rights to educational privacy, and understand that by signing below y for a fieldwork/student teaching assignment to be arranged.
Name (please print)	ID#
Signature	Date
Northern Arizona University invites all applicant used in fulfilling the University's federal and stat refusal to provide it will not subject you to any ad admission process. The information obtained with	TION TO SELF-IDENTIFY Is to provide the information requested below. This information will be the statistical reporting requirements. This information is voluntary and liverse treatment nor is it used in the Teacher Education Program ll be treated in a highly confidential manner.
Name as it appears on Social Security Card: Social Security Number:	
Gender:	female male
Date of Birth: month/day/year	
Race/Ethnic Background:	American Indian/Alaskan Native (Tribal Affiliation:) Asian/Pacific Islander African American/Black Hispanic White/Caucasian (not of Hispanic origin) Other:



Teacher Education Program RECOMMENDATION FORM

Stu	dent's Name (please print):					Date:						
	dent's Major:											
gro mir reli	the Student: Provide this recommup of pre-school through high schement of 15 hours. Recommend gious education teacher, volunteer and skill core (behave) sitting many	hool. The wo lations may over in a classro	rk expe come fro om or a	rience m om indiv nother s	ay be either voluntary or iduals who have observed imilar setting.	paid but must have occ l your work as a camp	coun	d in a selor	struc , swii	eturec mmin	l settin g instr	g for a uctor,
are	me child-care (baby-sitting, nann not considered professional refering adults.											
Fed Jan con	fore providing this form to your deral laws effective November 19 uary 1975 gave students the right affidential letters. The reverse of to pressing themselves if such letters	74, gave stud to waive aco his principle	lents an cess to t is that s	d former heir lette ome ind	students the right to insp rs of recommendation wh	en it was argued that r	nany	emp	loyer	s plac	ce more	e trust in
the	ou believe it might be to your ad letter, our professional staff will letters or identify the individuals	continue to g	ive you	informa								
	I waive my rights.											
	I do not waive my rights.	Stud	lent's	Signa	ture:							
app Ple (92	the Endorser: The student ident braisal of this student will help to ase mail the completed recomm 8) 523-1168 during application estions. Thank you for assisting	determine winendation fo time period	hether a rm to S s of Feb	cceptanc tudent S oruary 1	e of this individual would bervices, College of Educ -15 or September 1-15.	d be beneficial to the incation, NAU Box 5774	idivi i, Fl a	dual a agsta	and to	teac Z 86	her edi 011 or	ration. FAX to
1.	Did the applicant work in an in	structional se	tting fo	r a minin	num of 15 hours?	YES		NO				
2.	Did you directly observe this ap	oplicant?				YES		NO				
3.	With what age group did the ap	plicant work	?									
4.	Please rank the student using the fo	llowing scale:	0=not ol	oserved, 1	=lacking, 2=moderate, 3=ab	ove average, 4=exception	al					
	Maturity Dependability/Responsibility Initiative Judgment	0 1 0 1 0 1 0 1	2 3 2 3 2 3 2 3	4 4 4 4	Communication Ability to work Interaction with Self-confidence	cooperatively children/adolescents			2	3 3 3 3	4 4 4 4	
5.	Do you recommend this studen	t for the Tead	her Edu	ication P	rogram? YES	ON						
6.	Briefly describe the educationa	l setting:										
Enc	dorser's Name (please print):											
	dorsers Signature:											
	le:											