



Application for Admission to Teacher Education

Includes Candidate for Professional License Data (CPL)

Student Information

Name: _____

Banner #: _____

SSN #: _____

Address: _____

Phone: _____

City: _____

State: _____

Zip Code: _____

FSU Email: _____

Personal Email: _____

DOB: _____

Classification: *check one*

☐

Sophomore

☐

Junior

☐

Senior

☐

Licensure Only Non-Residency

☐

2nd Degree Seeking

☐

EESLPD

Additional Information

Yes

No

Transfer Student

☐☐

VA Benefits

☐☐

To which gender identity do you most identify?

☐

Male

☐

Female

☐

Transgender

☐

Non-binary/non-conforming

☐

Prefer not to respond

What is your race or ethnicity?

☐

American Indian or Alaska Native

☐

Asian or Asian Indian

☐

Black or African American

☐

Hispanic or Latino

☐

Native Hawaiian or Other Pacific Islander

☐

White

Employed in NC

Yes

☐

No

☐

Where: _____

*Attached copy of license & employment contract.***Pre-Candidate Type**

Full time

☐

Part time

☐**Additional Information** *(Check appropriate answer)***Yes****No**☐☐

Have you had a teaching license suspended or revoked?

☐☐

Have you ever been asked to resign from a position of employment?

☐☐

Have you ever been convicted of violations of law other than a minor traffic ticket?

☐☐

Do you have criminal charges or procedures pending?

If your answer to any of the above questions is yes, explain on a separate page and attach.**N.C. Department of Public Instruction Performance Reporting Information** *(Check appropriate answer)***Yes****No**☐☐

Have you ever received a Pell Grant?

☐☐

Are you a first-generation college student?

Please list the zip code for your residence at high school graduation _____**Disclaimer Statement:**

Participation in any field or clinical experience is dependent upon your acceptance by the appropriate city or county school system. Fayetteville State University does not make the final determination of your fitness for placement in an individual school. You should also be aware that individual schools or school systems will conduct a criminal background check on you and may require it to be at your expense. Incidents noted on your background check may affect your future as an educator. School districts may deny the College of Education's request to allow you to complete observation hours or student teaching in their respective schools based on the results of your background check.

You will not be able to complete your education program and will have to change your major if no public school district within 60 miles of the institution is willing to accept you for the experiential components of your program based on the results of your background check. Admission into teacher education or clinical experience at Fayetteville State University does not guarantee licensure by the State of North Carolina. Applicants must satisfy licensure requirements defined by law/statute and interpreted by the North Carolina Department of Public Instruction. If there are any incidents noted on your background check, you may have to appeal to the North Carolina Department of Public Instruction when attempting to obtain a North Carolina Teaching License.

I have read and understand the above statement._____
Signature_____
Date

Curriculum Information: *Select the curriculum which you are seeking licensure (one selection only)*

- ☐ Birth Kindergarten ☐ Elementary Education ☐ Special Education General Curriculum

Special Subjects (K-12)

- ☐ Health/PE ☐ Music Vocal ☐ Music Instrumental
☐ Spanish Education ☐ Art Education

Middle Grades Education (6-9) (your first concentration only)

- ☐ Language Arts ☐ Mathematics ☐ Science
☐ Social Studies ☐ Special Education ☐ Reading
☐ Core Academic Studies ☐

Secondary Education (9-12)

- ☐ Biology ☐ English & Literature ☐ Mathematics

Recommendation

Please provide two faculty or staff names for potential recommendation options. At least one of the individuals listed below must complete the recommendation form to be included in your packet.

Name:	Email:
Name:	Email:

Briefly explain why you would like to enter the teaching profession.

Click to start typing your explanation

Professional Pledge:

I am aware that entry in the Teacher Education Program involves much personal responsibility. I am willing to adhere to approved standards of conduct, attendance, and professional ethics. I will demonstrate a spirit of cooperation, a willingness to get along with others, to maintain good health and appropriate personal appearance, and to exemplify attitudes and actions suitable to the role of a teacher.

Pre-candidate Signature

Date

PRAXIS SCORES

Reading: _____ Date: _____

Writing: _____ Date: _____

Math: _____ Date: _____

Combined Total: _____

The following scores are required for admission. Please make sure to include all test taken.

SAT _____
GPA _____

ACT _____
Date GPA Confirmed _____

Completed EDUC 211

Yes ☐ No ☐

Semester/Grade _____

Clearance Form

Yes ☐ No ☐

Institutional Credits

Transfer Credits

Major Advisor

Date

Department Chair

Date

TEACHER EDUCATION COMMITTEE ACTION

ADMITTED ☐

NOT ADMITTED ☐

Date _____

Comments _____

Director of Teacher Education

Date