

INTERNATIONAL TEACHER EDUCATION PROGRAM

Departmental Evaluation & Recommendation based on the Applicant's Subject Area Competence

Candidate's Name _____

SSN ____ - ____ - ____ Subject Endorsement Area _____

BA/BS granted by _____ Major(s) _____

Secondary Education Advisor: Please review the transcript(s) of this applicant for the Curriculum & Instruction Department. After reviewing the course work, make a recommendation related to this person's subject matter preparation for teaching in the public schools. Thanks!

Note: This review form is not considered a letter of reference.

RECOMMENDATION:

_____ ADMIT

_____ ADMIT, with the recommendation to take the following courses (attach check list if used):

_____ ADMIT, with the requirement to take the following courses (attach check list if used):

_____ DENY

COURSE(S) NEEDED: In addition to subject area courses, secondary education applicants need:

_____ PSY 311 Human Development

COMMENTS:

_____ Acquainted with applicant who had been a student in our program.

_____ Acquainted with applicant only through review process.

Signature of Applicant Date

Signature of Secondary Advisor Date

Department Date

SECONDARY ADVISOR: Please return this form to the School of Education, Teacher Education Admissions Secretary (Room 602, School of Education) by February 1st.

Distribution: One copy – School of Education, One copy – Student, One copy – Secondary Advisor