



Education Minor Application Checklist

Educator Preparation Program (EPP)

	√	Item		
1		2.5 cumulative GPA in the semester prior to application		
2		Enrollment in or completion of EDUC1301 with a grade of at least C Semester taken: _____ Grade: _____		
3		Completed EPP application Due Nov 15 for spring admission or March 15 for fall admission		
4		Unofficial HT Transcript		
5		60 college credit hours		
6		TEAL and ECOS Access Instructions for Educators account setup		
7		Grade of "C" or better in ALL of the following courses		
			Sem/Yr	Grade
		ENGL 1301		
		ENGL 1302		
		MATH 1314		
		HIST 1301/1302		
		BIOL/PHYS/CHEM		
		US or Texas government		
8		Completion of 12 hours (15 hours for mathematics or science majors) in your content area with a grade of "C" or better to demonstrate competency in the content area		
	Course Number	Course Name	Sem/Yr	Grade
9		Interview (scheduled by EPP staff when application complete)		
10		Learning and Study Strategies Inventory (administered during interview)		
11		Professional Recommendation (1)		
12		Professional Recommendation (2)		
13		Professional Recommendation (3)		
14		Proof of membership in professional education organization (ATPE)		
15		For Applicants with Foreign Transcripts Only: TOEFL-iBT with a minimum score of 26 on the Speaking section		
16		For Applicants with Foreign Transcripts Only: THEA scores not more than 5 years old: 230 Reading, 220 Writing, 230 Math		

Name: _____ Date: _____

Educator Preparation Certification Program

Education Minor Application for EPP Admission

Due October 15 (for spring admission) or March 15 (for fall admission)

Applicant Information

Full Name: _____			Date: _____		HT ID: _____	
<i>Last</i>	<i>First</i>	<i>M.I.</i>				
Current Address: _____			Permanent Address: _____			
City _____		State _____	ZIP Code _____		City _____	
Cell Phone: () _____				Home Phone: () _____		
Personal Email: _____			HT Email _____			
Social Security Number _____			Date of Birth: _____			
Driver's License Number _____			State: _____			
Ethnicity <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other						

Academic Information

Classification: _____			Total Semester Credit Hours: _____			
Cumulative GPA: _____	Major: _____	Certification Area: _____				
SAT/ACT score(s): _____		Test (THEA or ACCUPLACR) score: Reading _____ Math _____ Writing _____				
Date Taken: _____		Date Taken: _____				

Academic Major Core Requirements: 12 hours (15 hours for mathematics or science majors) of subject-specific content – "C" or better

Course	Semester	Grade	Course	Semester	Grade	Course	Semester	Grade

Admission Core Requirements: "C" or better

EDUC1301	ENGL1301	ENGL1302
<i>Semester</i> <i>Grade</i>	<i>Semester</i> <i>Grade</i>	<i>Semester</i> <i>Grade</i>
MATH1314	HIST1301/1302	BIOL/PHYS/CHEM
<i>Semester</i> <i>Grade</i>	<i>Semester</i> <i>Grade</i>	<i>Semester</i> <i>Grade</i>
GOVT		
<i>Semester</i> <i>Grade</i>		

Certification Interest

Check the Program for which you are applying. Please select only *one* program option.

Special Education Certification:	<input type="checkbox"/> Special Education EC-12 th Grade <input type="checkbox"/> Social Studies 4-8 <input type="checkbox"/> Social Studies 7-12 <input type="checkbox"/> History 7-12 <input type="checkbox"/> English Language Arts Reading 7-12 <input type="checkbox"/> Music EC-12 <input type="checkbox"/> Physical Education EC-12 <input type="checkbox"/> Technology Applications 7-12 <input type="checkbox"/> Computer Science 8-12	
Single Subject Certification:	<input type="checkbox"/> Science 4-8 <input type="checkbox"/> Science 7-12 <input type="checkbox"/> Physical Sciences 7-12 <input type="checkbox"/> Life Sciences 7-12 <input type="checkbox"/> Mathematics 4-8 <input type="checkbox"/> Mathematics 7-12 <input type="checkbox"/> Mathematics/Science 4-8	
Supplemental Certifications:	<input type="checkbox"/> English As A Second Language (ESL) <input type="checkbox"/> Special Education	

I understand that I will have to pass a criminal background check in order to gain certification. I also understand that I can request a preliminary criminal history evaluation (PCHE). _____ Signature

For Office Use

ADMISSION APPROVED <input type="checkbox"/>	ADMISSION DENIED <input type="checkbox"/>	Comments: _____
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Department Chair Signature

Date

Disclaimer and Signature

Please read the following statements carefully:

- I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief. I understand that any false statements, misrepresentations, or omissions made by me on the application or during the application process or which later prove to be false or incomplete shall result in sufficient cause for refusal to be admitted into the Huston-Tillotson University Educator Preparation Program (HT EPP) or immediate dismissal from HT EPP if accepted.
- I agree to abide by all HT EPP testing and assessment requirements.
- I understand that I will be subject to a criminal background check by the State Board for Educator Certification before being issued a Standard Teaching Certificate and by independent school districts and/or charter schools before being allowed to student teach.
- I hereby authorize Huston-Tillotson University to investigate, through whatever means deemed appropriate, any information included in this application and facts resulting from the investigation unless otherwise noted. Huston-Tillotson University is also authorized to use any information obtained from its investigations to determine my suitability for entrance into HT EPP. I release Huston-Tillotson University from any liability in connection with the investigation.
- I hereby authorize any former employers or any other persons given as references (unless otherwise noted) to answer any questions that may be asked.
- I understand that meeting eligibility requirements does not guarantee an interview or acceptance into HT EPP.
- I understand that all documents submitted as part of the application process become the property of Huston-Tillotson University and are not returnable.
- I hereby authorize Huston-Tillotson University to release application information for employment purposes to local school districts. Information will be released only in response to school district inquiries.
- I understand that I am required to complete a 12-week full time unpaid student teaching assignment.
- I understand that there is no tuition refund if I am unable to meet the training requirements.
- I understand that the submission and/or contents of this application are not intended to create any contractual or other legal rights and are designed solely as a guide for applicants to the Huston-Tillotson University Educator Preparation Program.

If accepted, I agree to abide by the policies, procedures, rules, and regulations of Huston-Tillotson University and the Educator Preparation Program.

Signature: _____ Date: _____

Huston-Tillotson University Department of Education Preparation Program

FERPA Consent to Release Educational Records and Information

This release represents your written consent to permit (Name of EPP) to disclose educational records and any information contained therein to the specific individual(s) identified below. Please read this document carefully and fill in all blanks.

I, _____ [print full name] am a candidate at **Huston-Tillotson University Department of Education Preparation** and hereby give my voluntary consent to officials:

A. To disclose the following records:

- Records relating to any of my field-based experiences
- Records relating to my performance in the field
- TExES test score results

B. To the following person(s):

- School districts or other agencies associated with field-based experiences
- School-based/Agency-based administrators
- School-based/Agency-based cooperating teachers/mentors
- Program faculty

C. These records are being released for the purpose of:

- Conversing and reviewing performance
- Acquiring feedback
- Procuring required signatures

I understand that under the Family Educational Rights and Privacy Act of 1974 (“FERPA” 20 USC 123g; 34 CFR §99; commonly known as the “Buckley Amendment”) no disclosure of my records can be made without my written consent unless otherwise provided for in legal statutes and judicial decisions. I also understand that I may revoke this consent at any time (via written request to the educator preparation program) except to the extent that action has already been taken upon this release. Further, without such a release, I am unable to participate in any field-based experiences including 30 clock hours of observation, clinical teaching, student teaching, or internship.

Signature of Candidate

Date

TEA ID Number:	HT ID#
Date of Birth:	
Phone Number:	Email:

**Huston-Tillotson University
Education Preparation Program**

PROFESSIONAL RECOMMENDATION

Applicant's Name: _____ Date: _____

The above named applicant has selected you as a source of reference. We would appreciate your comments as to the applicant's qualifications.

Note: This evaluation meets the requirements of the Family Education Rights and Privacy Act of 1974 in that the above named applicant has voluntarily requested that this recommendation be held strictly confidential and not revealed to him/her.

<i>Check appropriate column for each item below</i>	Superior	Above average	Average	Fair	Poor	Do not know	Comments
Ability to present ideas							
Work habits							
Professional attitude							
Rapport with peers							
Resourcefulness							
Reliability							
Cooperation							
Professional appearance							
Enthusiasm							
Other:							

Comments: Please use the back of this page to make any additional comments you feel helpful to the committee reviewing this application.

Signature _____ Printed name: _____

Title: _____ Place of employment: _____

Address: _____ Telephone: (____) _____
Street Name City, State, Zip

Please return this recommendation to:

Huston-Tillotson University
 Education Preparation Program
 900 Chicon Street Austin, TX 78702
 Fax: (512) 505-3190 email: cdhamilton@htu.edu phone: 512-505-3096

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