



East Carolina University
NC TEACH *On Line* Application
Fall 2007 Start Date

COLLEGE OF EDUCATION
2007 *On Line* APPLICATION
Cohort III—*On Line*

Return Application and Transcripts
By June 1, 2007
To
Office of Alternative Licensure
108 Speight
ECU
Greenville, NC 27858

ECU NC TEACH *On Line* Application

(Please complete all parts of this application using the forms provided)

Section 1: Personal Data Sheet

(Please Print)

Social Security Number: _____ - _____ - _____ Date of Birth: ____/____/____

Last Name _____ First _____ Middle _____

Former Name(s): _____

Home Address: _____ Business Address: _____

Home Phone: () _____ - _____ Business Phone: () _____ - _____

Emergency Contact: _____ Phone: () _____ - _____

Email Address: _____ Sex: [] Male [] Female

Ethnic Origin: [] Asian [] Black [] White [] Hispanic [] Native American [] Other

Citizenship: [] US Citizen [] Non-US Citizen (Name country of citizenship) _____

Residency: [] NC Resident (Name county of residence) _____

[] Non-NC Resident (Name state of residence) _____

Section 2: Teaching Position and Area of Interest:

Check one: ___ I currently Teach _____ I am seeking a teaching position (now or in the fall)

Teaching Position:

County _____ School _____ Teaching Position _____

Subject(s) Taught _____

Area taught or interested in teaching (could check more than one area or level)

Science Education _____ Middle _____ High School

Mathematics _____ Middle _____ High School

English Education _____ Middle _____ High School

Social Studies _____ Middle _____ High School

Business Education _____

All areas require appropriate background (24 hours in content area is deemed appropriate at a grade of C or greater for each credit)

First Name _____ Last Name _____

Section 3: Academic History

List all colleges and universities where you have attended, starting with the most recent. Attach additional pages if necessary.

<u>UNIVERSITY</u>	<u>DATES ATTENDED</u>	<u>DEGREE & DATE OBTAINED</u>	<u>MAJOR</u>	<u>GPA</u>
_____	_____ - _____	_____	_____	_____
_____	_____ - _____	_____	_____	_____
_____	_____ - _____	_____	_____	_____
_____	_____ - _____	_____	_____	_____

Section 4: Work/Military Experience

List below your position and responsibilities of employment and/or military. Start with most recent or current position. **You must complete this section, although you are encouraged to attach a resume as well.** Attach additional pages if necessary.

Employer _____ City, State _____

Position _____ Date Started ____/____/____ Date Ended ____/____/____ Avg. hrs./wk. ____

Responsibilities _____

Employer _____ City, State _____

Position _____ Date Started ____/____/____ Date Ended ____/____/____ Avg. hrs./wk. ____

Responsibilities _____

Employer _____ City, State _____

Position _____ Date Started ____/____/____ Date Ended ____/____/____ Avg. hrs./wk. ____

Responsibilities _____

Employer _____ City, State _____

Position _____ Date Started ____/____/____ Date Ended ____/____/____ Avg. hrs./wk. ____

Responsibilities _____

Section 5: Activities and Information

Use additional pages if necessary

Teaching-related experience: _____

Fellowships, scholarships, and academic honors: _____

Foreign Languages: _____

Relevant technology skills: _____

Relevant experiences, skills, publications, and travel: _____

Experience with children or youth: _____

Awards, other: _____

Section 6: Current Licensure Status

Are you a current lateral entry teacher? [] Yes [] No

Are you a current emergency licensed teacher? [] Yes [] No

Local Education Agency (LEA) _____

Section 7: Honor Statement

Your application cannot be processed unless this section is completed.

Teacher education is committed to the integrity of the prospective teachers whom they admit to teacher education, and recommend for a license to teach. Prospective teachers must be appropriate role models for the students they will teach. Therefore, any major violation of the student code of conduct including, but not limited to major violations of the rules relating to academic integrity, specified in Part II.S of the student code or any violations of similar rules at other institutions will result in denial of admissions to teacher education. If any such major violation occurs following admission to teacher education, licensing authorities will be notified and the Director of Teacher Education will recommend that the offender be expelled from the University in accordance with university procedures. By signing below, you acknowledge your understanding of the consequences of violations of the rules described herein and authorize the release to the Office of Teacher Education any and all official records maintained by East Carolina University and waive any requirement that you be furnished a copy of those records prior to or concurrent with their release.

Student's Signature _____

In addition to the above, have you ever been convicted of a crime other than minor traffic violations?
 Yes No

Have you ever had a certificate or license revoked or suspended by any state or governing body?
 Yes No

Have you ever been subjected to disciplinary action by a college or university?
 Yes No

If the answer is yes to any of the above questions, you will be asked to provide documentation.

I certify that the information I have provided in this application and the accompanying forms is true and complete. I understand that falsifying or withholding information in this application constitutes grounds for immediate withdrawal of my application from further consideration, or cancellation of admission or registration.

I understand that any application materials submitted to the program become property of the College of Education and will not be returned.

I understand that I am required to provide my Social Security Number so that the College of Education and host site institutions can fulfill their reporting obligations under Federal and State tax laws. In addition, unless I have marked out this sentence, I am voluntarily permitting the College of Education and host site institutions to use my Social Security Number for the program's internal record keeping and information management operations.

Applicant's Signature: _____ Date: _____