

**APPLICATION FOR ADMISSION
TO UPPER DIVISION OF TEACHER EDUCATION
EAST CAROLINA UNIVERSITY**

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 admission 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 _____ B _____
ECU ID

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.
If the answer is yes to either of the above, please make an appointment to see the Director of Teacher Education in Speight 105 prior to your interview. I certify that the information provided in this application is correct and true.

Student's Signature _____ Date _____

SECTION I: *To be completed by student*

NAME _____
Last First Middle/Maiden Birthdate (MM/DD/YYYY)
ADDRESS (permanent) _____
Street City/State Zip
(local) _____
Street City/State Zip
PHONE: Permanent (____) _____ Local (____) _____
DEGREE _____ MAJOR _____ CLASSIFICATION _____ ADVISOR _____

Hours attempted at ECU _____ Hours completed at ECU _____ GPA _____

Have you completed an EARLY EXPERIENCE COURSE? Yes ____ No ____ Grade _____

Speech and Hearing Screening—Advisor will determine any potential problems and advise you as to further steps to take.

Testing—Passing PRAXIS I Scores or a composite score of 522 on PRAXIS I or a combination of PPST, SAT or ACT scores are required (see page 4).

TESTING (PRAXIS I, SAT or ACT)

PPST/C-PPST Reading _____ PPST/C-PPST Writing _____ PPST/C-PPST Math _____ **OR** Composite Score _____
SAT Verbal _____ SAT Math _____ SAT Total _____
ACT English _____ ACT Math _____ ACT Total _____

In order to be processed, PRAXIS scores must be on file in the Office of Teacher Education; Check score report for recipient code 5180 ECU. A copy of your SAT or ACT scores must accompany this application, only if being used in lieu of all or part of PRAXIS I scores. SAT/ACT scores may be found on your OneStop.

Technology competencies must be met in **one** of the following ways.

Dept. Course _____ or ASIP 2000 _____ or ASIP 2112 _____ or MIS 2223 _____ (formerly DSCI)
(# and grade) (grade) (grade) (grade)

or ASIP 2000 Challenge Exam _____ or transfer credit _____ **

**** Attach verification from major department showing *transfer credit*. ****

Are you here as a non-degree student? Yes _____ No _____

Are you here as a second degree student? Yes _____ No _____

IF YES, to **either** of the above, was previous school regionally accredited? Yes _____ No _____

Name of previous school and location _____ and GPA _____

If you are a transfer student, please complete:

When did you transfer to ECU _____ From _____
(Semester & Year) (Institution)

How many hours did you transfer _____

SECTION II: I have interviewed _____, verified the required information, and recommend him/her for admission to upper division of teacher education.

1. _____ Date _____

2. _____ Date _____

3. _____ Date _____

I have interviewed this student and am *unable* to recommend him/her for admission to upper division of teacher education. **Please make corrective suggestions on a separate sheet of paper.**

1. _____ Date _____ Reason: _____

2. _____ Date _____ Reason: _____

3. _____ Date _____ Reason: _____

SECTION III: I have reviewed this student's entire record and recommend him/her for admission to upper division of teacher education.

Department Chair/Coordinator

AFTER THE INTERVIEW, THE ADVISOR WILL FORWARD **COMPLETED** APPLICATION, CPL DATA FORM, AND COPY OF SAT OR ACT SCORE (if required) TO THE OFFICE OF TEACHER EDUCATION, SPEIGHT BUILDING, ROOM 105. (Do not forward interview sheets or essay.)