

APPLICATION DEADLINE: TUESDAY, October 13, 2009



**Middle/Secondary Education
Program (MSEP)
Application to the Licensure Program**

Complete information concerning your application to the Middle/Secondary Education Program (MSEP) is contained in the *Undergraduate Education Student Handbook* (available on-line at the Education Department's Website).

| Student Information: | |
|-------------------------------------|--------------------------|
| Name: _____ | Permanent Phone: _____ |
| CSS ID #: _____ | Permanent Address: _____ |
| CSS Box #: _____ Local Phone: _____ | City: _____ |
| CSS E-Mail: _____ | State: _____ ZIP: _____ |
| Academic Major Advisor: _____ | |

| Please list previous field experiences by grade level and school (Ex. Gr. 7-8, Woodland) | | | |
|--|-----------------|--|-----------------|
| EDU 2805 | Teacher: _____ | Field Experience in Content/ Licensure Area | Teacher: _____ |
| | School: _____ | | School: _____ |
| | Grade(s): _____ | | Grade(s): _____ |

| Minimum Requirements (Do not write in shaded areas) | |
|---|---|
| My Academic Major is: (Circle all that apply.) | Biology Chemistry English Mathematics Music Social Studies Library Media Specialist |

| Required Courses/Completion Plan | | | |
|--|-------|-----------------------|--|
| CSS Course | Grade | Transfer or Portfolio | Semester you expect to complete requirement (Ex. Spring 00) |
| EDU 1540: Introduction to Teaching and | | | |
| EDU 1505: Introductory Field Experience | | | |
| EDU 2102: Secondary Drug & Health Ed. Issues | | | |
| EDU 2200: Educational Psychology/Needs of Learners | | | |
| EDU 2300: Human Relations | | | |
| EDU 2800: Classroom Environment | | | |
| EDU 2805: Field Experience I – Middle School | | | |

| Program Areas (Check all areas you intend to pursue) | |
|--|---|
| <p align="center">Primary Licensure Area(s)</p> <input type="checkbox"/> Communication Arts & Literature (Gr. 5-12) <input type="checkbox"/> Instrumental & Classroom Music (Gr. K-12) <input type="checkbox"/> Vocal & Classroom Music (Gr. K-12) <input type="checkbox"/> Mathematics (Gr. 5-12) <input type="checkbox"/> Life Science (BIO; Gr. 9-12) and General Science (Gr. 5-8) <input type="checkbox"/> Chemistry (Gr. 9-12) and General Science (Gr. 5-8) <input type="checkbox"/> Social Studies (Gr. 5-12) <input type="checkbox"/> Library Media Specialist (Gr. K-12) | <p align="center">Additional Programs</p> <input type="checkbox"/> Ojibwe Language and Culture Education <i>(not a licensure program)</i> |

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Application Checklist

I meet all of the minimum requirements for admission to the Middle /Secondary Licensure Program, including:

- I have READ and UNDERSTAND the contents of the *Undergraduate Education Department Handbook*.
- I have fully completed this application.
- I have taken the *PPST* (Praxis I) exam.
- My *PPST* (Praxis I) exam scores are on file in the Education office.
- I have either completed or I have attached a plan outlining how I intend to complete my prerequisite coursework for the program.
- I have submitted the 'Dept/Program Recommendation' form to my academic major's department chair, licensure program director, or advisor.
- My CSS cumulative GPA is equal to or greater than the required 2.8 GPA.
- I have received a minimum of a "C" in all Education coursework required for the program.
- I am submitting all application materials together, at one time.
- I will adhere to the MN Teacher Code of Ethics during all of my coursework and field experience while in the Education Program.

The information I have provided is accurate and truthful.


Student Signature

____/____/____
Date

For assistance completing your Application to the Program, contact John Bauman, Chair of Undergraduate Program in the Education Department T4100, 723-5992 jbauman@css.edu.

APPLICATION DEADLINE: TUESDAY, OCTOBER 13, 2009

Application Deadline: 2nd Tuesday in October or March for the following academic year (Fall and Spring)

| | |
|---|--|
|  | Secondary Education Department / Program Recommendation for Admission to MSEP |
|---|--|

| |
|---|
| Recommendation for: _____ |
| Student's Name |

Department/Licensure Area _____

Students

- Write your name within the "Recommendation for:" text box above. Identify your "Department/Licensure Area". (Biology, Chemistry, Communication Arts & Literature, Mathematics, Music, Social Studies, and Educational Media)
- Ask your department chair, licensure coordinator, or academic advisor within your academic major to complete this and the attached form and forward them to the Education department.

Faculty (Department Chair, Licensure Coordinator, or Academic Advisor)

- Faculty making recommendations should review the student's grades in their major, in the process of making their recommendation.

Utilizing the resources provided (course grades) and your experiences with this student's ability and performance in your department / program, do you recommend that she/he be permitted to enroll in education courses.

- Yes
- Yes, but with reservations
- No

Please provide narrative information supporting the recommendation identified above.
(Use back if necessary)

Signature _____
Department Chair/Licensure Coordinator/Academic Advisor Date

(Please forward to the Education Department. Thank you!)