APPLICATION  Date ______________

(Please Print)

Last Name: __________________________________ First Name: ___________________ Middle Initial: ______

IRSC Student ID ________________________________ Date of Birth: ___________________

Address: __________________________________________ Street __________ Apt. # __________ City ______ State ______ Zip ______

Home phone # __________________ Work # _______________ Cell # __________________

Email ______________________________________________

Male □ Female □

1) What is your degree area?  Bachelor’s in? __________________ Master’s in? ________________ Ph.D./Doctorate in? ________________

2) What grade level do you plan to teach or are presently teaching?
   ECE (P-3) ___________ Elementary (K-8) ___________
   Middle School (5-9) Subject Area ___________ High School (6-12) Subject Area ___________

   Name of School (if presently teaching) ______________________________________________

3) When did you first seriously consider teaching as a career?
   Elementary School _______ Middle School _______ High School _______ Later/Career Change _______

4) How did you hear about the Educator Preparation Institute?
   Another student _______ A teacher _______ An advisor _______ Presentation _______ News article _______
   Poster _______ Brochure _______ Web site _______ Other __________________

5) Did you complete an application to the Florida Department of Education for a Temporary Certificate? _______

6) Do you have a statement of your Status of Eligibility? _______

7) In which county (ies) are you planning to teach? _________________________________

8) Which FTCE exams have you passed? _________________________________

*Bring completed application when you attend required information session.