

CHECKLIST FOR FORMAL ADMISSION INTO THE FOUR YEAR ELEMENTARY EDUCATION WITH LICENSURE PROGRAM

Submit this checklist with your Application for Formal Admission to the School of Education Undergraduate Elementary Education Program (Bobbie Pulver, EP 142, 552-6936, pulverb@sou.edu). **Completed Application packets due to the School of Education by Friday of the Third Week of the Quarter (Fall & Winter), First week of Spring Quarter.**

Student Name: _____ Email: _____

Authorization levels: Early Childhood (Age 3 to grade 4) and Elementary (Grade 3 to grade 6)

I. Coursework Requirements:

To qualify for admission, students must have completed the first two years of coursework as outlined on “Form A1: Bachelor of Arts or Science Degree in Elementary Education Initial Teaching Licensure Course Matrix.”

- _____ Attach completed Form A1.
- _____ Attach current, unofficial transcript(s) of all college or university coursework to date
- _____ Indicate your cumulative Grade Point Average (GPA of 2.75 or above is required).
- _____ Indicate total number of credits completed (minimum of 90 credits is required)

II. Practicum Requirements:

1. To qualify for admission, applicant must have completed two of the five required practicum experiences (RCC courses “ECE/ED 180,” and/or SOU course “ED 209”)

Please note: Each experience requires 30 clock hours per credit per placement. All five areas must be completed prior to end of Junior year – totaling a minimum of 150 practicum hours.

Practicum Type (Must Complete One of Each by End of Junior Year)	Date Completed	Name of Practicum Site (i.e., “Ashland Head Start”)	Attach one of the following for each of the two experiences:	
			Petition Form	Letter from Supervisor
A. Head Start program/Preschool age				
B. Primary grade classroom				
C. Upper elementary classroom				
D. Special Education/Resource Room				
E. ESOL/Bilingual classroom				
Other (Specify _____)				

2. Applicants are required to document two successful experiences working with groups of children by having each supervisor complete a letter of recommendation form provided in application. List supervisors’ names below and attach completed letter forms (or supervisors can forward them separately).

Supervisor Name, Letter 1: _____

Supervisor Name, Letter 2: _____

III. Interview/Advising:

_____ Verification of an informal interview/advising appointment with an Education Faculty Advisor.

_____ Transcript reviewed/requirements met (See the Form A1).

_____ Faculty Advisor Signature _____ Name, Printed _____ Date of Interview