

Application for Admission to Alternative Teacher Certification Program

	Application fo	or term starting Semester	☑ Spring Year ☑ Fall ☑ Summer	
Legal Name				
(First)	(Middle)	(Last)	(Maiden)	
Prior TLU attendance Yes	No If yes, TLU ID#(Leave blank unless yo	u have previously attended TLU	J)	
E-mail Address		Social Securit	<u>y</u> #	
Mailing Address		Home Phone	()	
	(Street address)			
		Cell Phone ()	
(City)	(State) (Zi	p)		
Gender: M F				
Driver's License No.		State	Expiration Date	
Place of Birth		Date of Birth		
(City)	(State)	(Country)	(mm/dd/yyyy)	
High School				
(Name o	of School)	(City and State)		
College(s)/University(s)				
(Nam	e of School)	(City and State)		
Year bachelor's degree earned	Major	Minor	GP	Α
Please select the ONE area EC – 6 Core Subjects Grades 4–8 Core Subject Grades 4–8 English/Lan Grades 4–8 Math Grades 4–8 Science Grades 4–8 Social Stud Grades 7–12 English/Lan Grades 7–12 History	ects nguage Arts & Reading nce	Grades 7- Grades 7- Grades 7- Grades 7- Grades 7- Grades 7- All-Level A All-Level A		у)

NOTE: Resumes will be accepted for additional information they contain but not in place of a completed application.

PREVIOUS TEACHER CERTIFICATION INFORMATION Have you been denied admittance into a teacher certification program? ves no If yes, program name _______date _____ reason for denial Have you been enrolled in a teacher certification program? ☐ yes ☐ no If yes, program name ______date _____ reason for discontinuation Have you been employed by a school district as a teacher or paraprofessional? \(\subseteq \text{ves} \subseteq \no If yes, as a ____teacher ___paraprofessional District From To Have you ever had a teaching certificate or deficiency plan/permit? Yes No State If yes, check below where applicable. □ Valid Texas Certificate? Date Issued _____Expires ____ Deficiency Plan? What entity issued the plan? When? Texas Emergency/Hardship/Special Assignment Permit? Date Issued ______ Expires _____ School District(s) Where Employed on Permit _______No. of Years _____ Valid Out-of-State Certificate Expired Other State Do you possess a certificate which is currently suspended, revoked, or pending such action in any state? Yes No **VETERAN STATUS** Are you a veteran? ☐ yes ☐ no If yes, are you eligible for Troops to Teachers? ☐ yes ☐ no If yes, are you eligible for Veterans Educational Benefits? yes no **CITIZENSHIP** - Are you a U.S. citizen? ☐ yes ☐ no If not, are you a resident alien with the right to work in this country? \(\subseteq\) yes \(\subseteq\) no If yes, attach proof of permanent residence to this application. If yes, attach proof of permanents If not, do you have a visa? ☐ yes ☐ no Expiration Date (Attach a copy of your current visa to this application) *The Alternative Teacher Certification Program does not contain enough hours each semester to qualify for full-time attendance status and will not be able to provide I-20 visa forms. CRIMINAL RECORDS - Have you ever been charged with a misdemeanor or felony offense that is presently pending final disposition or for which you have been convicted, received deferred adjudication, unadjudicated probation, or probation other than for parking or speeding tickets? ☐ yes ☐no If yes, please note in the space below and attach a written explanation along with a copy of the final orders of the court. A criminal record is not an automatic bar to employment and participation in the TLU Alternative Teacher Certification Program (PBTCP).

Offense	Date of Arrest	Disposition & Date	Comments

	C	ollege or University/City/State	Dates Attended	Type of Degree	Majo
			From/To		
English Spanish	Reading Speaking Writing Reading Speaking	CIENCY_Indicate your level of proficier 1=fully 1	fluent; 2=good skills; 3=fair		
_	Writing	1 2 3 Not applicable			
f you are	an internationa	I applicant, which of the following			
lave you	taken any Spa	nish-language proficiency tests? 🔲 Y	es No If yes, attach copy of tes	st score report(s).	
Other lang	guage (Please Reading Speaking Writing	specify)			

Race This information is requested for state and federal statistics.	Choose one.

■ Non-Hispanic

Ethnicity This information is requested for state and federal statistics. Choose one.

■ White	Black or African American	Asian		
■ American	Indian or Alaska Native	■ Native Hawaiian or Pacific Islander		
Other				

☐ Hispanic

PROFESSIONAL AND/OR ACADEMIC REFERENCES

List three persons (recent former employers/supervisors or professors/instructors) who have definite knowledge of your abilities and character. If you have had school experience, please include references from district or school supervisors. Send Reference Forms and envelopes to those three individuals for them to complete and return to the Department of Education (PBTCP), Texas Lutheran University. References from friends or family members will not be accepted.

Name	City	Address State		Work Phone/ Home Phone	Title/ Relationship
Haino	City	Oldio		Home i none	Notationarip
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			J		
CARLOVMENT EYDER					
EMPLOYMENT EXPER Begin with your present or	last job and acco	ount for all of your time bet	ween colle	ge graduation and the	present. If you are a recent
college graduate, include jo needed, please attach ano	jobs that you held	while in college. You may	also includ	de volunteer work expe	rience. If more space is
	חווכו אווכבו טו אמא	ei.			
Employer				From To	0
Address				Phone #	
Position		Part Time Full Time	□ Sur	pervisor	
		T UII TIITIO	<u> </u>	DELVISOL	
Responsibilities					
Reason for Leaving					
Employer				From T	<u> </u>
Address		Dort Time		Phone #	
Position		Part Time Full Time	☐ Sup	pervisor	
Responsibilities					
Reason for Leaving					
Employer				From T	To
Address				Phone #	
Position	-	Part Time Full Time	O Sur	pervisor	
		I UII TIING	LI Jup	iervisui	
Responsibilities					
Reason for Leaving					

Employer		From	То
Address		Phone #	
Position	Part Time Full Time St	upervisor	
Responsibilities			
Reason for Leaving			
·			

ESSAY QUESTIONS

Please respond to the following essay questions and attach your responses to this application. **Use essay format with complete sentences**, citing appropriately when applicable.

- 1. Describe your educational philosophy. You might want to consider the following:
 - a. age group of students you hope to teacher
 - b. type of teacher certification you hope to earn as part of the program
 - c. How do you feel students learn best?
 - d. What would the environment look like?
 - e. What are your thoughts regarding discipline and addressing unwanted behaviors?
- 2. Please describe your prior experiences with school-age children and why you want to be a teacher at this time in your life. Include why you are interested in applying for this program.
- 3. Share about an experience you had in school (positive or negative) that has had a lasting effect on your life.

PLEASE ENCLOSE THE FOLLOWING:

\$55.00 application fee (nonrefundable). (Please make check payable to Texas Lutheran University.)
Completed Authorization and Release Form of Criminal History Investigation.
ALL official transcripts from university(ies) granting degree(s) and from university(ies) where content area courses were taken. (To speed the
application process, you may send copies of your transcripts to the Department of Education, not the university in general; however, you cannot be
accepted into the program until official transcripts are on file at the Department of Education, Texas Lutheran University.)
 Foreign transcripts must be accompanied by a report from a recognized transcript evaluation service that indicates whether your transcript
reflects the equivalent of a bachelor degree with a 2.75 overall GPA.
If you have taken the Texas Oral Proficiency Test (TOPT), attach a photocopy of official score report (other language applicants only).
Photocopy of proof of permanent residence or visa, if applicable. The Alternative Teacher Certification Program does not offer enough hours each
semester to qualify as full-time attendance status and will not be able to provide I-20 visa forms.
TLU Tuition Agreement Form

APPLICANT CERTIFICATION AND UNDERSTANDING

I HEREBY CERTIFY that

- the foregoing information, as well as that on all supporting documentation, is true and correct
- this application and supporting documentation are provided of my own free will
- I authorize investigation for verification of all information related to my application
- I authorize Texas Lutheran University, Texas Education Agency, the State Board for Educator Certification, and collaborating school districts to obtain any criminal history records pertaining to me
- I authorize investigation of all matters relating to my application and/or suitability for an internship

I authorize exchange or disclosure of information among Texas Lutheran University, universities, local education agencies/school districts, charter
schools, private schools, the State Board for Educator Certification, The Texas Education Agency, ESCs, and/or other entities relating to teaching or
working with children and/or participating or cooperating in teacher certification programs, as such information may relate to my application, suitability
for internship, employment, and/or admission, status, good standing, or continuation as an applicant, intern, alternate for internship, university student,
or school employee before or after acceptance in any of those capacities.

I UNDERSTAND that

- false or misleading information in this application or supporting documentation may result in rejection of my application or dismissal from the program should I be admitted
- this application is NOT an employment contract
- this application does NOT constitute acceptance of me into the Texas Lutheran University Teacher PBTCP nor Texas Lutheran University
- acceptance of me by Texas Lutheran University into the Teacher PBTCP does NOT constitute employment, nor does such acceptance entitle me to
 employment
- Alternative Teacher Certification Program applicants and interns are NOT employees of Texas Lutheran University
- acceptance into the Alternative Teacher Certification Program may be based solely on professional judgment.

I FURTHER UNDERSTAND that acceptance as an intern will be effective ONLY upon receipt by me of written notice of acceptance by Texas Lutheran University, and that acceptance and continued status as an intern are contingent upon

- satisfaction of all eligibility and other program requirements, including payment of all fees for the program.
- continued, satisfactory employment as a teacher by a school district participating in the TLU Alternative Teacher Certification Program.

Applicant's Signature	Date

Please return your *completed* application packet and \$55.00 application fee (Made payable to Texas Lutheran University) to

Texas Lutheran University
Department of Education (Alternative Teacher Certification Program)
C/O Donna Kubena
1000 W. Court Street
Sequin, TX 78155

Meeting eligibility requirements does not guarantee an interview or acceptance into the TLU Alternative Teacher Certification Program. All submitted forms and documentation will become the property of the Texas Lutheran University. The TLU Alternative Certification Program does not discriminate on the basis of age, color, handicap or disability, ancestry, national origin, marital status, race, religion, sex, veteran status, or political affiliation. The Program is subject to change if required by the State Board for Educator Certification (SBEC).



Alternative Teacher Certification Program

Authorization and Release for Criminal History Investigation

APPLICANT TO COMPLETE I	HE FOLLOWING		
obtain a criminal history report a	on for employment, or in my position as a volunteer, studing understand that as directed by university policy and con as part of its pre-employment background check. I here on service bureau contacted by Texas Lutheran Univers	sistent with the job described, Texas Lutheral by authorize, without reservation, any law ent	n University will forcement
for the accuracy of the informati	ny liability for releasing information. I understand that Toon contained in any criminal history report. I release Te information obtained from any or all of the sources contained.	xas Lutheran University and its agents from a	
	ion is not an offer for employment by Texas Lutheran U versity may result in a refusal to hire, promote, reassign		ormation I have
Signature	 Date		
Date of Birth	Social Security Number	Driver's License Number	
Street Address			
City	State	Zip Code	

Please sign, date, and mail with your Alternative Teacher Certification Program application packet to

Texas Lutheran University Department of Education (Alternative Teacher Certification Program) C/O Donna Kubena 1000 W. Court Street Seguin, TX 78155



Applicant's Name _____ Date ____

Professional or Academic Recommendation Form for Alternative Teacher Certification Program

Applicant's Certification Fi	eld								
The above named applicant's qualifications		selected y	ou as a	source	of refere	ence. We	would appreciate your com	ments as to the	
							ts and Privacy Act of 1974 in eld strictly confidential and		
Check the column for each dimension below.	Superior	Above Average	Average	Fair	Poor	Do not know	Comments		
Ability to present ideas orally									
Ability to present ideas in writing									
Work habits									
Professional attitude									
Rapport with peers									
Resourcefulness									
Reliability									
Cooperation									
Professional appearance									
Enthusiasm									
Other									
Comments: Please ma will greatly assist us in n							n an attachment to this form. application.	Your comments	
Name					Ora	anization	1		
					Telephone				
Address E-mail address				Relationship to Applicant					
Signature						_			
				-			venience to ification Program)		

Phone: 830.372.8007 • FAX 830.372.6362

Texas Lutheran University C/O Donna Kubena 1000 W. Court Seguin, TX 78155

Email: Dkubena@tlu.edu

Thank you very much for your time and attention to this matter.



Professional or Academic Recommendation Form for Alternative Teacher Certification Program

Applicant's Name			Date						
Applicant's Certification Fi	eld								
The above named applicant's qualifications		selected y	ou as a	source	of refere	ence. We	would appreciate yo	ur comments as to t	he
NOTE: This evaluation named applicant has whim/her.		•			,	•	•		
Check the column for each dimension below.	Superior	Above Average	Average	Fair	Poor	Do not know	Comments		
Ability to present ideas orally		Avolugo				MIOW			
Ability to present ideas in writing									
Work habits									
Professional attitude									
Rapport with peers									
Resourcefulness									
Reliability									
Cooperation									
Professional appearance									
Enthusiasm									
Other									
Comments: Please may will greatly assist us in not not not not not not not not not no	naking an i	nformed d	ecision re	egarding	this app Org Tele	olicant's ap anization _ ephone			nts
Signature						_			

Please return this form at your earliest convenience to

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Texas Lutheran University

C/O Donna Kubena

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							ts and Privacy Act of 197 eld strictly confidential a	
Check the column for each dimension below.	Superior	Above Average	Average	Fair	Poor	Do not know	Comments	
Ability to present ideas orally		7.10.0.90						
Ability to present ideas in writing								
Work habits								
Professional attitude								
Rapport with peers								
Resourcefulness								
Reliability								
Cooperation								
Professional appearance								
Enthusiasm								
Other								
Comments: Please ma will greatly assist us in m							n an attachment to this for application.	m. Your comments
Name					Ora	anization	l	
NameAddress					Telephone			
E-mail address					Relationship to Applicant			
Signature						_		

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Texas Lutheran University

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Alternative Teacher Certification Program Tuition Agreement

An applicant who applies and is admitted to Texas Lutheran University assumes a definite financial obligation. The student (or his/her parent(s) or guardian(s) when applicable) is obligated to comply with the provisions of this account agreement.

A student who is regularly enrolled and has made payments in full or executed a university-approved payment contract is entitled to all the privileges of attending classes, taking examinations, receiving grade reports, securing course credit, and graduating/completing program.

A student who is delinquent in any financial obligation to Texas Lutheran University may be subject to exclusion from any or all of the usual privileges as a student of the university. Graduation or certification may be denied, and his/her academic record will not be released until the outstanding balance is paid in full.

By signing this agreement, I acknowledge that I understand the above financial obligations, and I also understand that if I default on my payments, Texas Lutheran University may disclose that I have defaulted, along with other relevant information, to credit bureau organizations. Further, I promise to pay a 1% interest charge (12% APR) on any past due balances. I promise to pay all attorney fees and other reasonable collection costs and charges necessary for the collection of any amount not paid when due.

Applicant's Signature	Date	
Applicant's Name (Please Print)	Applicant's SSN	

Please sign, date, and mail with your Alternative Teacher Certification Program application packet to

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