

LEVEL 1 APPLICATION

STAFF ONLY

ADVISOR: _____

DATE: _____

Welcome to the College of Education! This form must be completed by all undergraduates who are eligible for admission into the College of Education: Level 1 program.

PERSONAL DATA

Last Name:	First Name:	Middle Name:
Former Name(s):	WSU ID (9-digit #):	
Date of Birth (Month/Day/Year): ____/____/____	WSU Email:	@wayne.edu

ADDRESS

Street:		
City:	State:	Zip Code:
Is this the same address in Academica? <input type="checkbox"/> YES <input type="checkbox"/> NO		

TELEPHONE

Home:	Mobile:
Preferred Contact: <input type="checkbox"/> WSU Email	
<input type="checkbox"/> Other Email: _____	
<input type="checkbox"/> Text Message (Number): _____	

The Michigan Teacher Certification Code: Rule 390.1201

Please read the following statement and answer the four questions listed below (REQUIRED):

The Michigan State Board of Education may refuse to grant a teaching certificate to an applicant convicted, as an adult, of an act of immoral conduct contributing to the delinquency of a child, or a felony conviction.

1. Have you ever accepted responsibility in a civil infraction (excluding speeding tickets) or been convicted of (or pled no contest to) a misdemeanor or felony? Yes No
2. Have you had a teaching, school counselor, school psychologist, or school administrator certificate suspended or revoked? Yes No
3. Is there currently action pending against your teaching, school counselor, school psychologist, or school administrator certificate? Yes No
4. Have you ever surrendered or nullified a teaching, school counselor, school psychologist, or school administrator certificate? Yes No

A criminal background check is required for all applicants seeking Teacher Certification. Instructions can be found at: <https://apps.michigan.gov/ichat>

DEMOGRAPHICS (OPTIONAL)

This information is voluntary. It is requested to fulfill reporting obligations of the university and will remain confidential.

Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Race: <input type="checkbox"/> American Indian or Alaskan Native (Including all Original Peoples of the Americas) <input type="checkbox"/> Asian (Including Indian Subcontinent and Philippines) <input type="checkbox"/> Black or African American (Including Africa and Caribbean) <input type="checkbox"/> Native Hawaiian and Other Pacific Islander (Original Peoples) <input type="checkbox"/> White (A person having origins in any of the original peoples of Europe, North Africa, or the Middle East) <input type="checkbox"/> Middle Eastern (A person having origins from the Middle East/North Africa and West Asian region. It would include Arab states, Israel, Turkey, Afghanistan, Iran, Pakistan, Egypt, Iraq, and Saudi)	

PROGRAMS**Clear Check Boxes** **Elementary Education** (*Grades K-5 All Subjects; K-8 Self-Contained Classroom*)**1. Core Subject** (*Grades K-8*) Integrated Science Language Arts Mathematics Social Studies

Additional Minor (Optional): _____

2. Comprehensive Major Arabic Bilingual – Bicultural English as a Second Language (ESL)
 French Spanish Early Childhood

Additional Minor (Optional): _____

3. Special Education (*Grades K-12 Endorsement in Cognitive Impairment*) **Elementary Education-Early Childhood Education** (*Non-Certification Track*) **Learning Design and Technology** (*Non-Teaching Track*) **Kinesiology or Health Education** (*Non-Teaching Track*) Exercise and Sport Science Community Health Physical Activity Leadership **Kinesiology or Health Education** (*Teaching Track*) Major in Physical Education [Grades 6-12 or K-12] Minor (**REQUIRED**): _____ Major in Health Education [Grades 6-12] Minor (**REQUIRED**): _____ **Secondary Education** (*Grades 6-12*)*(Complete List Available ([Secondary Curriculum Guide](#)))*

Major: _____ Minor: _____

 Visual Arts Major (*Grades K-12; No Minor Required*)**REGULATIONS**

I certify that the information given in this application is complete and accurate, and I understand that the College of Education reserves the right to deny admission or revoke any admission granted if the information provided herein proves untruthful. I also understand that the submission of fraudulent academic records by a student for admission, transfer of credit, or any other purpose shall be cause for the student's dismissal from the College of Education. If admitted I agree to comply with the regulations of the College of Education. Find more information regarding Public Acts in your curriculum guide.

Signature (**REQUIRED**): _____ Date: _____