Application for Admission to the Educator Program
Additional/Advanced Certificate
Stephen F. Austin State University
College of Education, McKibben 212
SFA Box 6103
Nacogdoches, TX 75962
936-468-1577 – Fax
www.education.sfasu.edu

PLEASE FILL IN ALL BLANKS. Incomplete information will delay processing.

Date _____ S.S.N. _____ * Campus ID#_____

*Found at "mySFA" on the SFASU website – Not SSN

Name _____
Last First Middle

Local Address _____
Street or Box # City State Zip

Local Phone _____ Cell Phone_____

Current Employer: _____ Work Phone _____

Date of Birth _____ Gender _____
M/F

Ethnicity: ☐ Caucasian ☐ African American ☐ Hispanic ☐ Asian ☐ American Indian/Native Alaskan ☐ Other

Email address _____
(**required**)

A Teacher Service Record (TSR) will be required when applying for a professional certificate (see list below) upon completion of the program, except when applying for a Superintendent certification.

Program:

☐ Educational Diagnostician
☐ Reading Specialist (EC-12)
☐ Principal
  ☐ 18 Hr. Program
  ☐ 36 Hr. Program
☐ Master Reading Teacher (EC - 12)
☐ School Counselor
☐ Superintendent
☐ Master Math Teacher (4 - 8)
☐ Master Math Teacher (8 - 12)
☐ ESL (English as a Second Language)
☐ Bilingual Education
☐ Special Education
☐ Visually Impaired

GRE Scores: V_____ Q_____ W_____ T_____

For Office Use Only:

1. *Program Coordinator Signature_____Date_____
   Enter into NCATE database – send to Educator Certification Office – PO Box 6103
2. Educator Certification Signature_____Date_____