



Date:

Section 1 - Student Information

Student Name:	<input type="text"/>	Student ID #:	<input type="text"/>
Address:	<input type="text"/>	City/State/Zip	<input type="text"/>
Home Phone:	<input type="text"/>	Cell phone:	<input type="text"/>
Preferred E-mail Address	<input type="text"/>		

Section 2

Certificate sought and courses that must be completed

Graduate Leadership Certificate

- LS 610 Foundations of Leadership
- LS 611 Leadership & Org. Behavior
- LS 617 Financial Tools

Nursing Leadership Certificate

- NUR 610 Foundations of Leadership
- NUR 611 Leadership and Org. Behavior
- NUR 617 Financial Tools

Teacher Leader Certificate of Completion

- EDU 651 Fund of Teacher Leaders
- EDU 652 Applied Assessment
- EDU 653 Leadership Practicum

4-5 Generalist Certificate of Completion

- EDU 575 Pedagogy & Development
- EDU 576 Cont & Ped: Math & Science
- EDU 577 Cont & Ped: Soc & Lang Arts

P-12 Reading Certificate of Completion

- EDU 640 Literacy Foundations
- EDU 641 Phonics & Applied Word Stu
- EDU 642 Reading & Writing in P-12 CR
- EDU 643 Literacy Assmt, Diag & Interv
- EDU 644 Profess. in Clinical Lit Prac.

Student Signature

Date

Graduate School Use Only

Program Director Signature

Date:

Graduate Dean Signature

Date: