

## **EDUCATOR PREPARATION INSTITUTE**

		APPLICATIO	N Date _			
	(Please Print)					
Last Name:		First Nan	First Name:		Middle Initial:	
IRSC Student ID		Date of	Date of Birth:		_	
Addres	s:					
	Street	<u>t</u>	Apt. #	City	State	Zip
Home <sub>I</sub>	phone #	Work #	· · · · · · · · · · · · · · · · · · ·	Cell #		
Email _			· · · · · · · · · · · · · · · · · · ·			
Male [	Female					
1)	What is your degree area	Bachelor's in?  Master's in?  Ph.D./Doctorate				
2)	2) What grade level do you plan to teach or are presently teaching?  ECE (P-3) Elementary (K-8)					
	Middle School (5-9) Subject Area High School (6-12) Subject Area					
	Name of School (if presently teaching)					
3)	When did you first seriou					
ŕ	Elementary School			olLat	er/Career Cl	nange
4)	) How did you hear about the Educator Preparation Institute?					
-,	Another student A teacher An advisor Presentation News article					
	Poster Brochure					
5)	Did you complete an application to the Florida Department of Education for a Temporary Certificate?					
6)	Do you have a statement of your Status of Eligibility?					
7)	In which county (ies) are you planning to teach?					
8)	Which FTCE exams have you passed?					

<sup>\*</sup>Bring completed application when you attend required information session.