

Application for Recommendation by PVAMU for Probationary Certification as Authorized by the Texas Education Agency Emergency Waivers for 2019-2020

Social Security Number _____ Date of Birth _____ Gender Male Female Ethnicity (As in TEA) _____

TEA ID# _____ PVAMU ID# _____ Advisor's Name _____

First Name (As used in your TEAL Account) _____ MI _____ Maiden Name (if applicable) _____

Last Name (As used in your TEAL Account) _____ Generation (Jr., II, etc.) _____ Phone (____) _____ - _____

Permanent Address _____

City _____ State _____ Zip Code _____

PVAMU Email Address _____ Personal Email Address _____

CHECK THE DESIRED PROBATIONARY CERTIFICATE (Check only one.)

- CORE EC-6 CORE 4-8 ELAR 4-8 Math 4-8 Science 4-8 Social Studies 4-8
- ELAR 7-12 Mathematics 7-12 Health EC-12 Music EC-12 Educational Diagnostician
- Physical Education EC-12 Special Education EC-12 School Counselor Principal as Instr. Leader

CLINICAL TEACHING (PRACTICUM/INTERNSHIP) ASSIGNMENT

Full Name of School District: _____ City _____

School: _____ Cooperating Teacher/Mentor: _____

University Supervisor: _____ **ALL REQUIRED DOCUMENTATION ON PAGE 2 IS ATTACHED:** YES NO

TEXES EXAM HISTORY AS OF DATE OF THIS APPLICATION

Content Exam Status: Not Taken Taken Last Date Taken: _____ Passed Failed

PPR Exam Status: Not Taken Taken Last Date Taken: _____ Passed Failed

Driver's License # _____ State _____ Applicant's Signature _____ Date _____

Checklist of Required Documents

ALL documents as listed below must be attached and submitted along with page 1: *Application for Recommendation by PVAMU*. Incomplete Application Packets will not be processed.

____ Page 1: *Application for Recommendation by PVAMU* has been completed, signed, dated, and attached.

____ My Cooperating Teacher's (or Practicum/Internship Mentor's) Recommendation is attached.

____ My University Supervisor's Recommendation is attached.

____ My Official PVAMU Transcript showing degree conferred and date is attached, **or** has been ordered.
(Order online from the Registrar's Office; request for the transcript to be emailed to: **edcert@pvamu.edu**)

____ My online TEA Application for Certification has been completed. (Attach Receipt)

____ My online TEA Fingerprint Application has been completed, and fee paid. (Attach Receipt)

MY SIGNATURE BELOW CONFIRMS THAT:

____ I have completed and submitted all of the above required documents.

____ I understand that there must be a clear consensus (agreement) between the final letter from my Cooperating Teacher (Mentor) and the final letter from my University Supervisor in order for me to be recommended to TEA for the Probationary Certificate.

____ I understand that processing of this application may take up to 7 business days.

Signature of Candidate

Date

INFORMATION BELOW TO BE COMPLETED BY THE CERTIFICATION OFFICE:

Date Received by Certification Office: _____ Received By: _____

____ Packet is Complete ____ Packet is Incomplete Candidate Informed on (date): _____

____ Packet Resubmitted Date Resubmitted: _____ ____ Resubmitted Packet is Complete

____ Clearly Recommended by the Cooperating Teacher (Mentor) ____ Clearly Recommended by the University Supervisor

____ NOT Clearly Recommended by the Cooperating Teacher (Mentor) ____ NOT Clearly Recommended by the Univ. Supervisor

____ The Candidate Has Met All Requirements for Recommendation. Candidate was Recommended on _____

____ The Candidate DID NOT Meet All Requirements for Recommendation. Candidate was NOT Recommended.

Signature of Certification Officer: _____ Date: _____