ARKANSAS STATE UNIVERSITY PROGRAM OF STUDY FOR INITIAL LICENSURE

(For use with students having a bachelor=s degree in the secondary content for licensing)

SS#

Date

Name:

Idress:		Tele	phone #
	E-Mail:		
egree(s) Held:	Major :	Licensur	re Area Requested:
structions: All course requi	irements to be completed	d are to be checked (T).	COPIES OF ALL TRANSC
ed in the evaluation must be	sent to the Professional I	Licensure Officer of the C	ollege of Education with the con
m. Copies of the Program o	of Study Plan will be sent	t to the applicant, advisor,	department chair, and the Office
gistrar.			
plication for Arkansas Teac	her=s Licensure form at	the Office of the Registra	quirements, he/she must compler (Chickasaw Building). The O
Registrar will verify the appuration for issuance of the labe eligible for this licensur. A or BS in the appropriate a	icense. e route students must ha		the appropriate information)
ucation for issuance of the l	icense. e route students must ha	we the following. (Fill in	
ucation for issuance of the I be eligible for this licensur A or BS in the appropriate a	license. e route students must ha academic discipline er	eve the following. (Fill in Date of degree:	the appropriate information)
ucation for issuance of the I be eligible for this licensur A or BS in the appropriate a verall GPA of 2.50 or higher	license. e route students must ha academic discipline er	ove the following. (Fill in Date of degree: Overall GPA:	the appropriate information) date of:
be eligible for this licensur. A or BS in the appropriate a verall GPA of 2.50 or higher the electronic into the teacher education.	license. e route students must ha academic discipline er	Date of degree: Overall GPA: Date of or expected	the appropriate information)
be eligible for this licensur. A or BS in the appropriate a verall GPA of 2.50 or higher treening into the teacher educates are requirements:	e route students must ha academic discipline er ucation program	Date of degree: Overall GPA: Date of or expected	the appropriate information) date of: Semester to be taken/
be eligible for this licensur A or BS in the appropriate averall GPA of 2.50 or higher the elements: VOED 4503/5503	e route students must hat academic discipline er ucation program Professional Education (Date of degree: Overall GPA: Date of or expected	the appropriate information) date of: Semester to be taken/
be eligible for this licensur A or BS in the appropriate a verall GPA of 2.50 or higher creening into the teacher edit urse Requirements: VOED 4503/5503 AE 5553 Practicum	e route students must hat academic discipline er ucation program Professional Education (Foundations of Adult Educations)	Date of degree: Overall GPA: Date of or expected Courses d in Voc. Ed	the appropriate information) date of: Semester to be taken/

To continue in	the program students must meet the follo	wing additional requirements		
1.	Take the PPST or Praxis I			
2.	Must complete the appropriate Praxis II examinations			
	9 Principles of Learning and Teachi			
	9 Subject assessment(s): Adult			
3.	Must complete a non-criminal background check			
Applicant=s si	gnature:	Social Security Number:		
Advisor=s sign	ature:	Date:		
Department Ch	air=s signature:	Date:		
Licensure Office	er=s signature:	Date:		