

MY EDUCATIONAL PHILOSOPHY

Name: _____ Date: _____

In the space below, please explain your beliefs regarding education. If additional space is needed, please use the back of this page, or attach to this application.

Please provide recommendation forms to your instructors. The professors will submit the completed forms to the Teacher Education Office.

I certify that the above statements and all other information submitted in support of my application for admission to Teacher Education are true and correct and that I have included all relevant information.

Signature of Applicant

Date

INFORMATION RELEASE
Submit with Teacher Education Application

TO ALL STUDENTS IN TEACHER EDUCATION PROGRAMS:

The information in your teacher education file contains personal data, which is considered confidential under the Family Educational Rights and Privacy Act (FERPA). Information will be provided as necessary to professors and agencies for professional programs and evaluations. In addition, there may be requests for information related to your teacher education program from agencies outside the University.

In order, therefore, to avoid any problem both for the University and students please sign this statement indicating that you have read it and that you agree to the release of any information in your teacher education file to schools and agencies involved with your teacher education program.

Student's Printed Name

Student's Signature

Date