SCHREINER UNIVERSITY
GRADUATE ALTERNATIVE TEACHER CERTIFICATION QUESTIONNAIRE

NAME: _____ DATE: _____

MAILING ADDRESS: _____
Street City ST Zip

TELEPHONE: _____ _____ _____
(Daytime) (Evening) (Cell)

Fax Number: _____ EMAIL: _____

List where you received your Baccalaureate (4 year) degree?
What institution? _____ When? _____

What field? _____

Have you taken and passed the Graduate Record Examinations (GRE) in the last 5 years?
□ Yes □ No
If yes, please submit documentation showing test scores. If no, you must take the GRE as part of the admission requirements.

Have you worked as: A teacher's aide in a school district? □ Yes □ No
How long? _____
A Substitute Teacher? □ Yes □ No
How long? _____

Do you currently have an internship with a school district? □ Yes □ No
If yes, what school? _____ Supervisor's Name: _____

School Address: _____

School Telephone: _____ Fax Number: _____

In which level and field do you wish to be certified?

□ **Early Childhood–Grade 6 Generalist**

□ **Grades 4-8**
□ English Language Arts & Reading
□ Mathematics
□ Mathematics/Science
□ Generalist

□ **Grades 8-12**
□ English Language Arts
□ History
□ Mathematics
□ Life Sciences
□ Chemistry

□ **All-Level**
□ Exercise Science
□ Music

□ **Grades 6-12**
□ Business Education

If available, please send the following documents:
□ Originals of all college transcripts
□ Documentation of GRE scores.

Graduate Studies, CMB 6232, Schreiner University, 2100 Memorial Blvd., Kerrville, Texas 78028