

All students seeking teacher certification must be admitted to the Professional Program in Teacher Education. The following criteria are used in the application process:

1. Completion of attached application for admission to the Professional Program with the signature of the education advisor and of the content area advisor, if applicable, with a **one-page typed essay explaining why you want to teach and the characteristics you possess which will contribute to your success as a teacher.**
2. Completion of a minimum of 60 hours of course work that meet degree requirements at Charleston Southern University with a cumulative GPA of at least 2.5 on a 4.0 scale.
3. Completion of Education 201, Education 300, and Education 313 with a grade of “C” or better in each course. **Must have completed a "Declaration of Intent to Seek Certification" in Education 201.**
4. Completion of English 111, English 112 and the core mathematics requirement for the major with a grade of “C” or better in each course.
5. Receipt of a passing score as determined by the South Carolina Board of Education on all sections of the Praxis I examination (PPST) administered by Educational Testing Service (ETS). However, any candidate having attained 1100 or better on the SAT prior to March 2005 or 1650 after March 2005 or 24 or better on the ACT shall be exempt for taking the Praxis I. Proof of scores must be provided to the School of Education.
6. Submission of two letters of recommendation from faculty outside the Professional Program in Teacher Education.
8. Satisfactory demonstration of Teacher Educator Disposition Instrument.
9. **All students enrolled in the Teacher Education Program must undergo a fingerprint review by SLED and the FBI prior to Clinical Practice. Students with prior arrests or convictions of a serious nature or repeated misdemeanors may be denied admission to Clinical Practice and initial teacher certification. If this criterion applies to you, you need to meet with the Dean for the School of Education (863-7765).**

**NOTE: In order to maximize the efficiency of School of Education procedures, confidential candidate information may be shared electronically.**



School of Education  
Application for Admission to The  
Professional Program in Teacher Education

**Applicant Information**

ID#: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Local Address: \_\_\_\_\_  
*Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: ( ) \_\_\_\_\_  
Home Address: \_\_\_\_\_  
*Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Cell Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_  
Total Hours Earned \_\_\_\_\_ Advisor: \_\_\_\_\_  
Current Class Status \_\_\_\_\_ Expected Semester/Year of Clinical Practice: \_\_\_\_\_

I PLAN TO BE CERTIFIED TO TEACH THE FOLLOWING: \_\_\_\_\_

Early Childhood and Elementary Education Majors select Content Emphasis: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant Date

\_\_\_\_\_  
Signature of Education Advisor Date

\_\_\_\_\_  
Signature of Content Advisor (if applicable) Date

The Dean of the School of Education will advise each applicant in writing of action taken by the Teacher Education Committee. Written notice of intent to appeal before the Teacher Education Committee must be forwarded within 45 days of the dates of notification of an unfavorable decision.



**RECOMMENDATION FOR ADMISSION TO THE TEACHER EDUCATION PROGRAM  
(FACULTY MEMBER OUTSIDE SCHOOL OF EDUCATION)**

I, \_\_\_\_\_, am applying to the Teacher Education Program at Charleston Southern University in \_\_\_\_\_. I am asking that  
(Name) (Major)  
you complete the information requested below and return this form to the Dean of the School of Education. I authorize  
the release of this information to the Dean of the School of Education.

\_\_\_\_\_  
student signature

\_\_\_\_\_  
date

**THE RECOMMENDING PROFESSOR IS TO COMPLETE THE FOLLOWING SECTION AND RETURN  
THIS FORM TO THE DEAN OF THE SCHOOL OF EDUCATION, WINGO HALL.**

Based on your professional and personal knowledge of the applicant, please complete the requested information below.  
Your evaluation will be used in the assessment of the applicant's acceptance into the Teacher Education Program.

Please use the following scale to rate according to criteria listed below:

| (1) inadequate | (2) adequate                                      | (3) excellent | (N.O.) not observed     |
|----------------|---|---------------|-------------------------|
| _____          | quality of work                                   | _____         | initiative              |
| _____          | problem-solving skills                            | _____         | writing skills          |
| _____          | punctuality/attendance                            | _____         | speaking skills         |
| _____          | interest and participation<br>in class activities | _____         | enthusiasm              |
| _____          | ability to accept criticism                       | _____         | cooperation with others |

Please check the appropriate statement below:

\_\_\_\_\_ I recommend the applicant.

\_\_\_\_\_ I recommend with reservation.

\_\_\_\_\_ I do not recommend the applicant. Please explain reason(s).

Additional Comments:

Department (must not be Education): \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_



CHARLESTON  
SOUTHERN  
UNIVERSITY

SCHOOL OF EDUCATION

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