

# VERIFICATION BY INSTITUTION: COMPLETION OF APPROVED EDUCATION PROGRAM

**TO THE APPLICANT: Fill in the information above the line. Please type or print.**

Last Name	First Name	Middle Name	Maiden Name
Street Address		City	State
			Zip Code
Social Security Number			

**TO THE DESIGNATED COLLEGE OFFICIAL:  
Fill in ONE of the boxes and BOTH sections at the bottom of the page.**

The applicant completed requirements for the

<input type="checkbox"/> bachelor's	<input type="checkbox"/> master's
<input type="checkbox"/> six year (educational specialist)	<input type="checkbox"/> doctorate

degree and **finished an approved education program in the licensure area(s) of (e.g. elementary education, music, secondary mathematics, etc.)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date program completed \_\_\_\_\_  
month, day, year

The applicant did not earn a degree from this institution but completed an approved education program at the degree level of

<input type="checkbox"/> bachelor's	<input type="checkbox"/> master's
<input type="checkbox"/> six year (educational specialist)	<input type="checkbox"/> doctorate

**in the licensure area(s) of (e.g. elementary education, music, secondary mathematics, etc.)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date program completed \_\_\_\_\_  
month, day, year

The program completed meets the following accreditation, approval, or program requirements (check **ALL** that apply):

- National Council for Accreditation of Teacher Education (NCATE)
- National Association of State Directors of Teacher Education and Certification Standards (NASDTEC)
- Education program approval by the state of \_\_\_\_\_
- Regional accreditation by (name of body) \_\_\_\_\_

The applicant completed an education program approved in the area(s) and at the level(s) recommended. The approved program was in effect during the applicant's period of study.

\_\_\_\_\_

name of institution

\_\_\_\_\_

designated official (**Licensure Officer or Dean of Education**)

\_\_\_\_\_

title

\_\_\_\_\_

signature date

\_\_\_\_\_

email address

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## Form V: Instructions

**Follow these instructions for completing Form V:**

**Applicant:**

- Fill in current personal information (please print or type).

**Designated college official:**

- complete **one (1)** of the boxes in the center section of this form
- check the regional accreditation, state approval and program requirement boxes at the bottom of this form
- sign form verifying the above
- include email address

**Submission:**

Mail the completed Form V, **to the student or requesting School System.**

*Please do not fold down the corners of pages or use staples or paper clips to secure the application materials. Doing so will slow down the automated application process and delay your response. Mail the unfolded materials in a 9" x 12" envelope. Thank you.*