



## Prerequisite Evaluation Checklist

Name \_\_\_\_\_  
*Last*                    *First*                    *MI*

Student Number: \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Phone \_\_\_\_\_

Application Received Date: \_\_\_\_\_ Program: \_\_\_\_\_

Prerequisite Admission Date: \_\_\_\_\_ Term: \_\_\_\_\_

### **PREREQUISITE REQUIREMENTS**

#### **Basic Skills Exam**

CBEST Pass/Registered Date: \_\_\_\_\_

BA/BS Degree Date/Univ. \_\_\_\_\_

Writing Skills Pass/Registered Date: \_\_\_\_\_

Transcripts on File

Other: \_\_\_\_\_ Date: \_\_\_\_\_

GPA Last 60 Units \_\_\_\_\_

#### **Clearance**

COC Application Date: \_\_\_\_\_

**OR**

COC/Credential Issuance Date: \_\_\_\_\_

#### **Tuberculosis Clearance**

Negative Result Date: \_\_\_\_\_

### **SUBJECT MATTER**

#### **Multiple Subjects**

Registered Test Date: \_\_\_\_\_

Subtest I Passed Date: \_\_\_\_\_  Subtest II Passed Date: \_\_\_\_\_

Subtest III Passed Date: \_\_\_\_\_

#### **SPED/Single Subject**

Exam Subject: \_\_\_\_\_

Registered Test Date: \_\_\_\_\_

Subtest I Passed Date: \_\_\_\_\_  Subtest II Passed Date: \_\_\_\_\_

Subtest III Passed Date: \_\_\_\_\_  Subtest IV Passed Date: \_\_\_\_\_

Full Waiver Verified \_\_\_\_\_  
 University

4/5ths Waiver \_\_\_\_\_  
 University





## Single Subject Evaluation Checklist

Name \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Student Number \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Previous Credentials Held \_\_\_\_\_

Application Received Date: \_\_\_\_\_ Program: \_\_\_\_\_ Previous Admission: \_\_\_\_\_  
Program/Term \_\_\_\_\_Ready for Interview  Interview Date: \_\_\_\_\_

Admit Date: \_\_\_\_\_ Term: \_\_\_\_\_ Status: Fully Admit \_\_\_\_\_ Conditional \_\_\_\_\_

Denied Date: \_\_\_\_\_

Writing Sample  BA/BS Degree \_\_\_\_\_Letters of Recommendation 1 2  Transcripts on fileBasic Skills Exam: \_\_\_\_\_  
Exam/Date \_\_\_\_\_Field Exp 

COC/Credential Date: \_\_\_\_\_

TB Clearance Date: \_\_\_\_\_

US Constitution \_\_\_\_\_  
Course/University/Exam \_\_\_\_\_

GPA Last 60 Units \_\_\_\_\_

**Subject Matter Competency**

Exam Subject \_\_\_\_\_

 Subtest I passed date: \_\_\_\_\_  Subtest II passed date: \_\_\_\_\_  Subtest III passed date: \_\_\_\_\_ Subtest IV passed date: \_\_\_\_\_ Waiver Verified \_\_\_\_\_  
University/Date \_\_\_\_\_**Prerequisite Courses****ENG 475**  Met  Waived  In Progress \_\_\_\_\_**SPED 345**  Met  Waived  In Progress \_\_\_\_\_**EDUC 520**  Met  Waived  In Progress \_\_\_\_\_**EDUC 512**  Met  Waived  In Progress \_\_\_\_\_**EDUC 521**  Met  Waived  In Progress \_\_\_\_\_**EDSS 515**  Met  Waived  In Progress \_\_\_\_\_**Credential Recommends**

Credential Type: \_\_\_\_\_ Authorization: \_\_\_\_\_ Issuance Date: \_\_\_\_\_





## Special Education Level II Evaluation Checklist

Name \_\_\_\_\_

Student Number\_\_\_\_\_

Address

Email Address  Phone

#### Previous Credentials Held

**Application Received** **Previous Admission**

Previous Admission \_\_\_\_\_

### Program/Term

Ready for Interview  Interview Date \_\_\_\_\_ Change of Objective Date: \_\_\_\_\_

Admit Date: \_\_\_\_\_ Term: \_\_\_\_\_ Status: Fully Admit \_\_\_\_\_ Conditional \_\_\_\_\_

Denied Date:

With  $S = 1$ ,  $\square$

Letter of Dr. R. L. L. to the editor, 17-2-1900.

Part 1: Skill E

### Preliminary Credential Inventory Data

#### Date of Initial Employment

### Verification of Employment/Experience

### Transcripts on File □

### Credential Recommends

Credential Type:

Issuance Date:



## Educational Leadership Evaluation Checklist

Name \_\_\_\_\_

Student Number \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Phone \_\_\_\_\_

#### Previous Credentials Held

Application Received Date: \_\_\_\_\_ Program \_\_\_\_\_ Previous Admission \_\_\_\_\_

Program \_\_\_\_\_ Previous Admission

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### Program/Term

Ready for Interview  Interview Date: \_\_\_\_\_ Change of Objective Date: \_\_\_\_\_

Admit Date: \_\_\_\_\_ Term \_\_\_\_\_ Status: Fully Admit \_\_\_\_\_ Conditional \_\_\_\_\_

Denied Date:

## Writing Sample □

## Writing Sample □

Letters of Recommendation 1  2

CBEST

Valid Credential \_\_\_\_\_

Exp. Date: \_\_\_\_\_

### Verification of Employment/Experience

### Notification Form

Transcripts on File

## GPA Last 60 Units

## Recommendation

Credential Type: **ISSUANCE DATE:**