







	Apply to SDSU Online credential program	For Internal
Requirements:	Attach application to Feather River College (required class for	Use Only:
	Advanced Test Prep for anyone who has not passed both CBEST and CSET)	Date received:
	Have a BA degree or will have degree by June 2019	receivea:
	Cumulative GPA of 2.75	
	Currently employed at School District or County Office	
	Attach unofficial transcripts from all schools attended	
	Attach CBEST & CSET scores, if completed (This is not required for	
	acceptance into the program) Attach (2) Letters of Recommendation	
PERSONAL INFORMATIO)N	
Full Name:		
-	Maiden/Other Name:	
Home Mailing Address:		
Street	City State Zip Code	
Primary E-mail:	Alternate E-mail:	
Primary Phone No	Alternate Phone No	
Ethnicity:	Decline to State	
IDENTIFICATION VERIFI	CATION (for CTC credentialing purposes)	
G 11G 12 V 1	D. CDI.	
Social Security Number:	Date of Birth:	
EMPLOYMENT VERIFICA	ATION	
County:	Employer District:	
Current Position:	Years of Employment:	
School Site, if applicable:	School Address:	
Site Administrator:	Site Administrator E-mail:	_









COLLEGE COURSEWORK QUES	TIONNAIRE
Do you have a Bachelor's Degree?	
Yes No	If yes, date you were awarded it:
	College it was from:
	If no, date you will be awarded degree:
	College it will be from:
Are you currently enrolled at a 4 Y	ear College?
Yes No	If yes, where?
COLLEGE COURSEWORK VERIOR Please note that the candidate must forwar information provided below.	FICATION d official sealed transcripts to Grant Personnel to confirm the
College Attended:	Dates of Enrollment:
Number of Completed Credits:	GPA:
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Number of Completed Credits:	GPA:
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Number of Completed Credits:	GPA:
College Attended:	Dates of Enrollment:
-	
Number of Completed Credits:	GPA:









TESTING VERIFICATION
Note: This is <u>not</u> a requirement for acceptance into the program.
All enrolled candidates are required to take and pass the CBEST before exiting the credential program. Please indicate whether at this time, this requirement has been satisfied.
I have completed the CBEST requirement. A copy of the official CBEST score is to be submitted with the completed Letter of Commitment
I have not yet completed the CBEST requirement. Your Advisor will work with you to include this in your Credentials Pathway plan that will be developed during advisement.
I have completed the CSET requirement. A copy of the official CSEST score is to be submitted with the completed Letter of Commitment
I have not yet completed the CSET requirement. Your Advisor will work with you to include this in your Credentials Pathway plan that will be developed during advisement.
ADDITIONAL REQUIRED INFORMATION
Two (2) letters of recommendation (see attachment)
Personal Statement (please attach to completed application)
LETTER OF RECOMMENDATION
This recommendation is in support of:
This recommendation is submitted by: Please print
Job Title: Contact Information (e-mail/phone #):
Years You Have Worked with the Applicant:









Please describe why this applicant should be selected to participate in this grant-funded, credential program.	









PERSONAL STATEMENT IN SUPPORT OF CLASSIFIED EMPLOYEE GRANT APPLICATION
Name of Applicant:
Please Print
County: District Employer:
The credential I am seeking to secure:
Multiple Subject (Pre-K thru Grade 6)
Single Subject (Grade 6 thru Grade 12) Content Area:
In addition, I am interested in pursuing a bilingual or cross-cultural certification.
Yes; this is of interest to me.
No; this is not of interest to me at the present time.
Please respond to the following prompts. You may continue your responses on an additional attachment if needed. 1. Please describe your experiences working with students in an educational setting.









2.	What contributed to your desire to become a classroom teacher?
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3.	What additional information do you want the Selection Committee to consider as they review your application?
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