



STUDENT TEACHING/INTERNSHIP/PRACTICUM CREDIT CHECK FORM

Name: _____ ID #: _____

Current Phone #: _____ Permanent Phone #: _____

Permanent Address: _____

Semester/Year of ST Placement: _____ Sem/Yr for ECE or SPE: _____

Degree Program: Bachelor Master's Certification only—Area _____

Below, please record all majors and minors. Where applicable, please name a content area. For example, if you are certifying as an EA-A English major with an EA-A Spanish minor: for 1st major check EA-A and type English; and for 1st minor check EA-A and type Spanish.

1st Major

EC-MC
EA-A

MC-EA
EC-A

2nd Major

EC-MC
EA-A

MC-EA
EC-A

1st Minor

ECE
EA-A

MC-EA

2nd Minor

ECE
EA-A

MC-EA

Name any additional emphasis/concentration: _____

LIST COURSES NOT COMPLETED (do not include courses in progress):

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.....

FOR OFFICE USE ONLY

General Ed. work completed? _____ Core/Professional Ed. courses completed? _____

Describe any deficiencies:

Cumulative GPA _____

Major 1 GPA _____

Minor 1 GPA _____

Concentration 1 GPA _____

Major 2 GPA _____

Minor 2 GPA _____

Concentration 2 GPA _____

Approved for Student Teaching/Internship/Practicum Experience.

Signature: _____

Date: _____

Certification Officer