USU Alternative Teacher Preparation Program Prospective Candidate Information Sheet

(Mail/Fax a completed copy of this sheet to **EACH** participating school district to which you are interested in applying for a special education position)

Contact Information	
Name:	
Address:	
Email:	
Home Phone:	Cell Phone: Other:
	Circle the phone number that is your first preference to contact you.
• If any of the above changes, please contact each district so that we have current information.	
	Education
University:	© Bachelor's degree © Master's degree
Major:	Minor:
	re(s): © None © Elementary © Secondary © Other:
Years teaching ex	perience:
	Screening Information
Results of USU required basic literacy and math assessments:	
Math Score: Basic Literacy results:	
Date you passed both assessments: Location where you took tests:	
Transcripts reviewed. College math courses passed (C or higher):	
What grade level(s) do you prefer to teach? (Check all that apply)	
© Elementary © Middle School/Jr. High © High School © No Preference	
What is your preferred employment option?	
© Fu	Il Time only © Part-time only © Would consider Part-time © No Preference
What languages of	ther than English do you speak?
	Additional Information
Dlagge respond to	
_	the following questions in a well-written response (no longer than 2 type-written pages):
 Why do you want to teach students with disabilities? What are your expectations of the USU Alternative Teacher Preparation Program? 	
3. How did you learn about the USU Alternative Teacher Preparation Program?	
Thank you for your interest in becoming a special education teacher. Districts will contact you based on their individual hiring procedures.	
DISTRICT/CHARTER USE ONLY:	
Scheduled Screen	
Schoduled School	ing interview.

© YES

6 NO

Hired by District/Charter: