

**EDUCATOR PREPARATION ADMISSION APPLICATION
CHECKLIST
(Attach this Checklist to the Application Packet)**

Name _____ ID# _____

The following items must be submitted in the order indicated below:

Completed Educator Preparation Admission Application form.

Signed Personal and Professional Fitness Form

If you answered "Yes" on question 4, you must complete the Criminal Charges Self-Reporting Form.

Signed Professional Dispositions Statement

Unofficial Transcript (mavlink)

NOTE: Please submit the completed application materials via email to Laura Osborn at losborn@unomaha.edu, including your unofficial transcripts. The forms are fillable so you can complete them, save them to your computer as a PDF, and email them.

Application packets must be submitted by 11:59 pm on **October 1** (for spring admission), **March 1** or **June 1** (for fall admission). **If the deadline is on a weekend, application packets are due on the Friday before the weekend.**

SPECIFIC TO EDUCATOR PREPARATION PROGRAMS

The University of Nebraska issues academic degrees which may not satisfy all requirements for professional credentials (e.g. certification, licensure) in other states or countries. Our educator preparation programs are accredited and designed to align with the rules and regulations of Nebraska's education credentialing entity, the Nebraska Department of Education.

Because regulations can vary from state to state, if you anticipate you will seek professional credentialing outside of Nebraska, do not assume your degree from the University of Nebraska will satisfy all requirements in another state or country.

Please contact the credentialing entity where you will be seeking a license or certification to identify any additional expectations that may be required. Decisions regarding the issuing of certification are made by state agencies and not Educator Preparation Programs. Because these agencies may change their information you are encouraged to go directly to an agency website to access the most current information. It is also recommended that you correspond directly with the agency representatives in the state or country in which you plan to work, prior to, or early in, your academic career.

Certification

To the best of my knowledge, I hereby certify that the information contained in this application is accurate and complete.

Signature

Date

7/7/22

Educator Preparation Admission Application

All application materials must be submitted by October 1 for spring admission, March 1 or June 1 for fall admission. If deadline falls on a weekend, applications are due the previous business day.

Full name		NU ID	
Address		Date of birth	/ /
UNO e-mail		Phone	() -

Course or transfer equivalent	Semester, year taken (F20, S19)	Grade or "test" for test out	Office use	Course or transfer equivalent	Semester, year taken (F20, S19)	Grade or "IP" for in progress	Office use
ENGL 1150				TED 2100* #			
ENGL 1160 #				TED 2200* #			
Gen ed math #				*These professional education courses have to be completed within the past 10 years. #Can be enrolled at the time of application.			
CMST 1110/ 2120 #							

Academic information		Transfer credit, if any		
Combined earned hours (EHRS)		Transfer institution	#Hours	Degree
Semester admitted to UNO		1.		
NU GPA (if 12 hours complete in NU system) or transfer GPA		2.		
		3.		

Major (choose one)	Select one or more areas of Interest or concentrations, if required by major
Early Childhood Inclusive Birth-Grade 3	<div style="display: flex; justify-content: space-between;"> Birth to Age 3 Age 3 to Grade 3 </div>
Special Education K-6 or 7-12 (choose only one)	<div style="display: flex; justify-content: space-between;"> Elementary Special Ed K-6 Secondary Special Ed 7-12 </div> <p><i>(Choose if you wish to be endorsed ONLY in Special Ed. For dual endorsements, choose Elementary K-6 or Secondary 7-12 with Special Ed dual endorsement.)</i></p>
Elementary Education K-6 <i>Choose either a concentration OR a dual endorsement</i>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Concentrations ESL Inclusive Practices School Library STEM </div> <div style="width: 45%;"> Dual endorsements Early Childhood Education Deaf/Hard of Hearing ESL Special Education </div> </div>
Middle Grades Education 5-9 <i>Choose 2 subjects: one must be Math or Science</i>	<div style="display: flex; justify-content: space-between;"> Math Science Language Arts Social Science </div>
Secondary Education 7-12 <i>Some choices cannot stand alone. Please consult an advisor if you have questions.</i>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> Art PK-12 Biology BMIT Chemistry Deaf/Hard of Hearing </div> <div style="width: 50%;"> ESL English French German Language Arts </div> <div style="width: 50%;"> Math Music PK-12 PE PK-12 PE/Health 7-12 Physics </div> <div style="width: 50%;"> Science Social Science Spanish Special Education </div> </div> <div style="margin-top: 10px;"> Optional Secondary concentrations: School library Inclusive Practices </div>

Have you ever been withdrawn from or received a non-passing grade in a student teaching course? YES NO
 If Yes, please explain on another sheet of paper. 7/7/22



Office of Academic Advising, Roskens Hall 204

PERSONAL AND PROFESSIONAL FITNESS

Printed Name of Student _____

ID# _____

1. Have you ever had a professional license, certificate, permit, credential, or other document authorizing the practice of a profession suspended, revoked, voided, denied, rejected, or voluntarily surrendered? ☐ Yes ☐ No
If yes, attach a written statement that fully explains the facts and where this occurred.
2. Are you currently the subject of any inquiry of investigation by any law enforcement agency, prosecutor's office, governmental body, or licensing agency? ☐ Yes ☐ No
If yes, attach a written statement that fully explains the facts and where this is occurring.
3. Is any action currently pending against you by any law enforcement agency, prosecutor's office, governmental body, or licensing agency? ☐ Yes ☐ No
If yes, attach a written statement that fully explains the facts and where this is occurring.
4. Have you ever been found guilty of a felony or misdemeanor or entered a plea of guilty or no contest to a felony or misdemeanor in any criminal, drug, or juvenile court? The ONLY exceptions are speeding and parking violations.* ☐ Yes ☐ No
If yes, complete Criminal Charges Self-Reporting Form and provide court papers to the Office of Academic Advising.
5. Is an order or determination currently in effect by a court or any other governmental body which finds you to be any of the following: a mentally ill and dangerous person; mentally incompetent to stand trial; acquitted of criminal charges because of insanity; an incapacitated person in need of a guardian; or unable to manage your property due to mental illness, mental deficiency, chronic use of drugs or chronic intoxication? ☐ Yes ☐ No
If yes, attach a copy of the order and a written statement that fully explains the facts and where this occurred.
6. Are you currently an inpatient or resident in a mental health facility due to a determination by a qualified mental health professional? ☐ Yes ☐ No
If yes, attach a written statement that fully explains the facts and where this is occurring.
7. Do you have a Social Security number? ☐ Yes ☐ No
If no, make an appointment to see the Director of Academic Advising, Certification, RH 204 at 402-554-3482.

If the status of any of the above questions changes while you are a student at UNO, you must complete a new form.

DECLARATION, AUTHORIZATION AND SIGNATURE

I declare that the information furnished herein is true, correct, and complete to the best of my knowledge. I hereby grant the permission and authorize the University of Nebraska-Omaha (UNO) to verify all responses with any mental health facility or governmental agency and to obtain and review all records maintained by any criminal justice agency, including a criminal history record information check, regarding any of my criminal charges or convictions. I hereby release, discharge, and exonerate UNO, its employees, and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing of such records and information. I understand that any material submitted in connection with this application will become the property of UNO. I understand that inaccurate information submitted shall be cause for denial or removal from an educator preparation program.

Date: _____ Signature: _____

Signature of Student

*If you answered "yes" to any of these questions, except question 10, make an appointment to see the Director of Academic Advising, Certification, Roskens Hall 204, at 402-554-3482 immediately. If you previously answered "yes" on this form, discussed the conviction(s) with Lorraine Street or appropriate departments representative, and your status has not changed, you do not need to make an appointment. **If you are in a graduate program, and have already received your teaching certificate and the incident happened before your original teaching certificate was issued and is on record at the Nebraska Department of Education, there is no need to contact the Office of Academic Advising.**

The University of Nebraska at Omaha is an equal opportunity educator and employer with a comprehensive plan for diversity

**University of Nebraska at Omaha College of
Education, Health, and Human Services
Professional Dispositions Statement**



Teaching is a profession that requires its potential candidates to be individuals of integrity. Prospective teachers must be able to demonstrate that they are individuals of strong moral character who can make mature decisions for themselves and for the students whom they will teach. Teachers are responsible for the education, safety, and well-being of anyone in their charge. The University of Nebraska at Omaha College of Education, Health, and Human Sciences prepares future teachers who show a high degree of moral character and the ability to act responsibly inside and outside the classroom. These individuals must be able to serve as representatives of the College and the University and must demonstrate the personal and professional dispositions of the teaching profession.

Inappropriate behaviors on the part of the candidates, which in the College's reasonable judgment, violate the University's Student Code of Conduct, establish a lack of integrity or moral/ethical character, or demonstrate conduct or patterns of behavior inconsistent with the personal and professional dispositions expected in the teaching profession, shall be sufficient grounds for 1) denial of admission to or enrollment in educator preparation programs, 2) dismissal or removal from programs, courses, observations, field experiences, practica, clinical practice, and similar field-based experiences, and 3) withholding institutional recommendation for certification. Such behaviors could be evidenced within the University or PK-12 school environment, outside the University or PK-12 school environment, and/or in an electronic or digital context. Displays or patterns of behaviors may be established by any credible means including, but not limited to, the facts surrounding a record of arrests or convictions or information obtained by the University directly from a school or district official. Teacher candidates should note that the College of Education, Health, and Human Sciences must provide a recommendation for certification in order for a student to obtain his/her teaching certificate. Accordingly, inappropriate behaviors by candidates could jeopardize not only their educational goals at UNO but also their professional goals including the ability to become a certified teacher.

Candidates who exhibit inappropriate behaviors may be referred for a Conference of Concern to formally identify the unsuitable behaviors, recommend corrective action(s), and determine the candidate's suitability for continuing in educator preparation. Candidates who have convictions outlined in the Nebraska Department of Education's Rule 20, Section 005.07A, will be allowed to continue in the educator preparation program or referred for certification only through an appeal to the Commissioner or State Board of Education.

I swear/affirm that I have read and understand the Professional Dispositions Statement of the College of Education, Health, and Human Sciences.

Print Name _____

Signature _____

Date _____



Office of Academic Advising, Roskens Hall 204

CRIMINAL CHARGES SELF-REPORTING FORM

This form must be completed if you answered “YES” to
Question #4 on the Personal and Professional Fitness Form.

Name: _____
Please print

NUID#: _____

Complete a separate section for each charge. Document additional charges on reverse side of this form.

Charge #1

Criminal charge: _____

Date of offense: _____ County in which offense occurred: _____

Name of arresting party/agency (Police or Sheriff's Office): _____

Court of Jurisdiction: _____

Plea and conditions of probation, if any: _____

Details of the incident (you may attach a separate sheet for further explanation): _____

Charge #2

Criminal charge: _____

Date of offense: _____ County in which offense occurred: _____

Name of arresting party/agency (Police or Sheriff's Office): _____

Court of Jurisdiction: _____

Plea and conditions of probation, if any: _____

Details of the incident (you may attach a separate sheet for further explanation): _____

Return this form to the CEHHS's Office of Academic Advising, Roskens Hall 204.

Court documents related to each charge must be furnished.

I declare that, including any attachment, the provided information is true and correct. I understand that submitted inaccurate information is cause for denial or removal from an educator preparation program.

Student Signature (do not use pencil)

Date

6/30/20