# College of Louisiana

# Department of Education Application for Graduate Admission

### APPLICATION INSTRUCTIONS

- 1. Print in ink or type all information required on this application. Be as thorough as possible.
- 2. Be sure the application is signed.
- Attach to the front of the application a non-refundable \$50.00 application fee, which covers the cost of processing. DO NOT SEND CASH THROUGH THE MAIL. All checks or money orders are to be made payable to Centenary College.
- 4. Mail the application with fee to:

Department of Education Centenary College of Louisiana 106 Kings Highway, Suite 203 Shreveport, Louisiana 71104

## ADMISSION DEADLINES

All transcripts, scores & required documents must be received in the Department of Education office by the deadlines for that term.

Fall Term Admission - July 1 Spring Term Admission — November 1 Summer Term Admission — April 1

## ADMISSION REQUIREMENTS

- 1. Have a **non-education bachelor's degree** from a regionally accredited traditional liberal arts college or university. *Degrees from nontraditional institutions such as Management Institutes, Online degrees, or Distance Learning degrees will not be accepted.*
- 2. Be academically **eligible** to return to their previous institutions.
- 3. Provide **TWO (2) complete official transcripts** (sent from the institution directly to the Centenary Department of Education) from every institution previously attended, including undergraduate and graduate work. Transcripts from at least one of the previously attended institutions should show evidence of completion of a bachelor degree from a regionally college or university. (All documents submitted for admission become the property of Centenary College and cannot be returned to applicants).
- 4. Have a **career grade point average of 2.5** (4.0 system) or better for all work pursued, including graduate and undergraduate grades.
- 5. Have submitted a **completed application** form with a **\$50 nonrefundable application fee**. Application forms are available in the Department of Education and online at:

http://www.centenary.edu/attachments/academics/education/educgradapp15.pdf

- 6. Present passing scores as mandated by the State of Louisiana Department of Education on:
  - a) **PRAXIS I Core Academic Skills for Educators in Reading, Writing, and Math tests.** Minimum passing scores can be found at: http://www.teachlouisiana.net/pdf/CURRENT%20PRAXIS%20 CHART\_4\_16\_14.pdf. *Candidates with earned master's degrees are exempt from this requirement.*
  - b) **PRAXIS II Content Area Test for area of** certification.

Minimum passing scores can be found at: http://www.teachlouisiana.net/pdf/CURRENT%20PRAXIS%20 CHART\_4\_16\_14.pdf

- 7. Submit a written **essay**, of no more than 500 words, explaining your career progression, your significant career accomplishments, your professional strengths, and your professional goals.
- 8. Submit a **resume**.
- 9. Provide **Immunization Records** including the Meningococcal Vaccination.
- 10. Submit signed Centenary **Professional Code of Conduct Form**. (found with application)
- 11. Submit signed Centenary **Background Check Consent Form**. (found with application)
- 12. Participate in a successful admission **interview** with the Chairperson of the Department of Education or designee.

All correspondence concerning admission to the Master of Arts in Teaching programs should be sent to:

Department of Education Centenary College of Louisiana 106 Kings Highway, Suite 203 Shreveport, Louisiana 71104 Telephone: (318) 869-5223

# GRADUATE INFORMATION FOR ADMISSION

Name	FIRST	MIDDLE INITIAL	MAIDEN (IFAPPLICABLE)
Social Security Number			
Mailing Address	STREET	ADDRESS	
	CITY	STATE	ZIP
Home Phone ( )		Cell ( )	
Work ( )		Fax ( )	
E-mail			
Date of Birth		_ Place of Birth	
U.S. Citizen? TYES NO If	no, state nationality		
Legal Residence (State)		Years in Residence	Parish/County
High School attended?			Are you registered to vote?
Have you ever attended Centenar	ry College of Louisiana before? 🗖 YES 🗖 NO	If so, when?	
Have you ever been accused, cha	rrged or convicted of a felony? $\Box$ YES $\Box$ NO		
Have you ever been accused, cha	rrged or convicted of sexual misconduct, abuse, o	r neglect of a minor or student?	I YES INO
If "yes" to either of the two prece	eding questions, list offense(s) and disposition of	charges:	

$\label{eq:constant} This information will be used in a nondiscriminatory manner, consistent with applicable civil rights laws.$		
Which of the following best describes you?		
A. ETHNICITY (please check yes or no)	<b>B. RACE</b> (please check all applicable)	
Yes Hispanic	White Asian	
If no, then continue to	Black or African American	
Section B.	Native American	
	Native Hawaiian or other Pacific Islander	
No, not Hispanic	C. GENDER 🗆 Male 🗆 Female	

## EDUCATION INFORMATION

List all colleges and universities you have attended, will all information:

NAME AND LOCATION	FROM — TO (Semester / Quarter)	DEGREES RECEIVED	DATE AWARDED

Are you eligible to return to the LAST institution you attended?  $\Box$  YES  $\Box$  NO

# EMPLOYMENT RECORD

Present Employer	PARISH
ADDRESS / CITY / STATE / ZIF	P
Telephone Number	
IF EMPLOYED IN A SCHOOL DISTRICT THEN:	
How many years teaching in this school?	How many total years of teaching?
Name of your principal/supervisor?	How long have you taught in the State of Louisiana?
Are you certified to teach? 🗅 YES 📮 NO	
EMERGENCY NOTIFICATION (in case of emergency, notify)	
Mana	Delationship
Name	Relationship
Address (city/state/zip)	Telephone Number
<b>REFERENCES</b> (please list two academic and/or professional references)	
Name	Telephone Number
Address (city/state/zip)	
Name	Telephone Number
	-
Address (city/state/zip)	

PROGRAM INFORMATION	ATTACHMENTS		
Indicate Entering Term: Fall Spring Summer	Essay Please provide a typed narrative, in 500 words or less, of your career		
Are you seeking initial certification?	progression, your significant career accomplishments, your professiona strengths, and your professional goals.		
In what area are you seeking certification?	Current Resume		
Elementary, 1-5 K-12 Choral Music K-12	Signed Centenary Background Check Consent Form		
Secondary, 6-12	Signed Professional Code of Conduct Form		
If Secondary, what will be your content area of certification? Circle one.			
Biology German			
Business Mathematics			
Chemistry Physics			
English Social Studies			
French Spanish			
General Science	1		

I certify that the foregoing information is true and correct. I agree to be governed by the academic standards and policies of Centenary College of Louisiana, in making application for admission to Centenary College, and in compliance with the provisions of the "Family Education Rights and Privacy Act" of 1974. I affirm that I will be responsible for the payment of all fees and that I will comply with the regulations regarding fees, expenses, and refunds outlined in the current College catalogue.

Signature \_\_\_

Date\_\_\_

Centenary College of Louisiana encourages application for admission from all persons and does not discriminate on the basis of gender, race, color, age, religion, disability, sexual orientation, or national or ethnic origin in its admission policies, loan programs or other college programs, policies and activities. In compliance with section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, Centenary College will make every reasonable effort to accommodate the needs of its students with disabilities.



College of Louisiana

**Department of Education** 106 Kings Hwy., Suite 203 Shreveport, Louisiana 71104



#### **BACKGROUND CHECK CONSENT FORM**

I,\_\_\_\_\_ (please print), the undersigned, agree and acknowledge that I am

a Centenary College of Louisiana Department of Education M.A.T. applicant for (please check) spring \_\_\_\_\_,

summer \_\_\_\_, or fall \_\_\_\_ in the year 20\_\_\_\_ program.

I hereby authorize a review and full disclosure of all information and records concerning myself to Centenary College Department of Education relative to educational background, medical, criminal history, alcohol, drug abuse, and psychiatric treatment and/or consultation, employment and pre-employment records, including background reports. I hereby authorize all persons or agencies to provide such information to Centenary College and I agree to hold harmless all such persons or agencies.

I understand that any information obtained by a personal history background investigation will be considered in determining my acceptance into the program.

I further understand, agree and acknowledge that in the event my application is denied, the reasons for said denial will not be revealed to me.

I agree that in the event that a current or prospective employer requests such information, said information will be provided.

I also understand that any false information provided verbally and/or on this form or application would be grounds for denial at any point during the program.

The following information is needed in order to conduct a personal background check. Thank you.

Printed name of applicant		Signature of applicant			
Social security number	Date of birth	Race	<del>_</del>	Gender	
Driver's license number – S	tate	-			
Street address	City		State	Zip	
Daytime phone number		Evening phone number			-
Signature of witness		Printed name of witness			

This conduct form results from a similar document that the Louisiana Department of Education (LDOE) will require you sign in order to receive certification from the State of Louisiana.



#### **PROFESSIONAL CODE OF CONDUCT FORM**

#### ALL QUESTIONS MUST BE ANSWERED ON THIS FORM

١.	Have you ever had any professional license/certification denied, suspended, revoked or voluntarily
	surrendered? (Mark with an X) YES NO
2.	Are currently being reviewed or investigated for purposes of such action (or pending action) as stated in #1.
	(Mark with an X) YES NO If yes, what state?
3.	Have you ever been accused, charged or convicted of any felony offense, been found guilty or entered a plea
	of nolo contendere (no contest), even if adjudication was withheld?
	(Mark with an X) YES NO If yes, please provide the following information:
	Date of Conviction: State of Conviction:
	Court of Jurisdiction of Conviction:
4	Have you ever been accused of inapproprioate contact with a student?
1.	YES NO If yes, please explain:
5.	Have you ever been accused, charged or convicted of a misdemeanor offense that involves any of the
	following:
	a. Sexual or physical abuse of a minor child or other illegal conduct with a minor child.
	b. The possession, use, or distribution of any illegal drug as defined by Louisiana or federal law.
	(Mark with an X) YES NO
6.	If you answered "yes" to either questions #3 or #4, list the offense(s) and explain:
7.	Have you ever been granted a pardon for any offense as stated in #3 or #4?
	(Mark with an X) YES NO
	form and dealars that all information given by me is true, somest, and complete to
	ffirm and declare that all information given by me is true, correct, and complete to e best of my knowledge. I understand that any misrepresentation of facts may result in
	minal prosecution and/or denial of my teaching certificate. Responses to any of the above
-	estions may require further investigation before admission or continuance in the Centenary
De	partment of Education Graduate Program.
Na	me (please print):

Signature: \_\_\_\_