



Alternative Teacher Certification Program Application

Applying for Certification:
Please check one only.

| EC-4 TExES | 4-8 TExES | 6-12 | 8-12 TExES |
|---|---|-------------------|--|
| English as a Second Language Generalist | English Language Arts and Reading | Secondary Spanish | Chemistry |
| Generalist | English Language Arts and Reading/Social Studies | | English Language Arts and Reading |
| | English as a Second Language Generalist | | Generalist |
| EC-12 | Generalist | | Healthcare Science Technology Education |
| English as a Second Language Supplemental | Mathematics | | History |
| Physical Education | Mathematics/Science | | Life Sciences |
| Special Education | Science | | Mathematics |
| Special Education Supplemental | Social Studies | | Physical Sciences |
| | | | Science |
| | | | Social Studies |
| | | | Speech |

Applicant's name: _____

Social Security Number _____ - _____ - _____ Date _____

Name _____
Last First Middle

Please indicate any other identifying name(s) which may appear on your documentation:

Driver's License No. _____ State _____ Expiration Date _____

Date of Birth _____ Gender: Male _____ Female _____

Address

_____ Street City State Zip

Telephone _____
Home Business/Daytime

E-mail Address _____ Fax Number _____

The following information is optional and is for reporting use only to provide statistical information requested by various State and Federal agencies:

Ethnic Background: Circle One

| | |
|--|----|
| African American (non Hispanic) | 02 |
| Asian, Pacific Islander, Oriental American | 04 |
| Hispanic | 03 |
| Native American or Alaskan Native | 05 |
| White (non Hispanic) | 01 |

Statement of Equal Educational Opportunity

Lone Star College-Tomball seeks to provide equal education without regard to race, color, creed, religion, sex, disabling condition, age, national origin, or veteran's status. This policy extends to all programs and activities supported by the college.

Employment History

This section **must** be completed. A resume cannot be substituted. Start with your most recent work

| | | | |
|-----------------------|--------------------|----------------------|-------------------------|
| Date Started | Date Left | Name of Organization | Address |
| Supervisor's Name | Supervisor's Title | Phone | Your Title Upon Leaving |
| Description of duties | | | |
| Reason for leaving | | | |

| | | | |
|-----------------------|--------------------|----------------------|-------------------------|
| Date Started | Date Left | Name of Organization | Address |
| Supervisor's Name | Supervisor's Title | Phone | Your Title Upon Leaving |
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| Reason for leaving | | | |

| | | | |
|-----------------------|--------------------|----------------------|-------------------------|
| Date Started | Date Left | Name of Organization | Address |
| Supervisor's Name | Supervisor's Title | Phone | Your Title Upon Leaving |
| Description of duties | | | |
| Reason for leaving | | | |

Education

| | |
|----------------------|------------------------|
| Degree granted in | Month _____ Year _____ |
| College / University | |
| City, State | |
| GPA | |
| Major | |
| Minor | |
| Type of Degree | |

| | |
|----------------------|------------------------|
| Degree granted in | Month _____ Year _____ |
| College / University | |
| City, State | |
| GPA | |
| Major | |
| Minor | |
| Type of Degree | |

| | |
|----------------------|------------------------|
| Degree granted in | Month _____ Year _____ |
| College / University | |
| City, State | |
| GPA | |
| Major | |
| Minor | |
| Type of Degree | |

Professional References

List three people (past or present employers/supervisors) who have first hand knowledge of your abilities and character. Please ask each of these persons to send a letter of reference on your behalf to the Tomball Alternative Teacher Certification Program Director. The references may be contacted if there are questions after the personal interview.

| Complete Name | Address | Phone | Title/Company |
|---------------|---------|-------|---------------|
| | | | |
| | | | |
| | | | |

Answer the following questions.

1. I currently reside in the state of Texas? _____ Yes _____ No

2. Are you a US citizen? _____ Yes _____ No

If not, are you a resident alien with the right to work in this country? _____ Yes _____ No
(If yes, attach proof of permanent residence to this application.)

3. Have you ever been charged with a felony or misdemeanor? _____ Yes _____ No

If yes, were you convicted? _____ Yes _____ No

4. Have you ever been treated for, or troubled by, any serious illness that might adversely affect your ability to teach? _____ Yes _____ No

5. Have you ever been under the treatment of a physician for an emotional problem or nervous disorder? _____ Yes _____ No

If you answered "yes" to questions 3, 4, and/or 5, please explain: _____

6. Are you fluent in English? _____ Yes _____ No
(If not, you will be required to take an English proficiency exam.)

7. Are you fluent in a language other than English? _____ Yes _____ No
If yes, what language? _____ Speak _____ Write

8. Are you presently in the military, or have you ever been in the military (including the National Guard or the Armed Forces Reserves)? _____ Yes _____ No
If yes, please give the branch of service and your rank: _____

9. Are you eligible for VA benefits? _____ Yes _____ No

10. Have you ever been a trainer/instructor in the workplace or other environment?
_____ Yes _____ No If yes, in what subject or area? _____

11. Have you ever applied to or participated in any other teacher preparation program?
_____ Yes _____ No If yes, please explain: _____

12. Are you a graduate of a teacher education program? _____ Yes _____ No

13. Have you ever student taught in a public or private school? _____ Yes _____ No
If yes, please tell when, where, and what subject: _____

14. Do you possess a certificate which is currently suspended, revoked, or pending such
action in any state? _____ Yes _____ No If yes, please explain: _____

15. Have you ever taught in a private and/or public school? _____ Yes _____ No
If yes, please tell when, where, and what subject: _____

Please check any of the boxes below that apply:

| | | | | |
|--------------------------|--|------------------------------------|----------------|-------------|
| <input type="checkbox"/> | Valid Texas Certificate | Date Issued: _____ | Expires: _____ | Subject(s): |
| <input type="checkbox"/> | Expired Texas Certificate | Date Issued: _____ | Expired: _____ | Subject(s): |
| <input type="checkbox"/> | Texas Emergency/Special Assignment Permit | Date Issued: _____ | Expires: _____ | Subject(s): |
| <input type="checkbox"/> | School District Teaching Permit | Date Issued: _____ | Expires: _____ | Subject(s): |
| <input type="checkbox"/> | Valid Out of State Certificate | Date Issued: _____ State: _____ | Expires: _____ | Subject(s): |
| <input type="checkbox"/> | Expired Out of State Certificate | Date Issued: _____ State: _____ | Expired: _____ | Subject(s): |

Candidate Agreement

Please read the following statements carefully:

- ◆ I understand that I must submit a \$40 non-refundable application fee for my file to be considered by the Tomball Alternative Teacher Certification Program. I also understand that submission of this application does not obligate Lone Star College-Tomball in any way.
- ◆ I agree to abide by all Lone Star College-Tomball testing and assessment requirements.
- ◆ I certify that the statements made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that any false statements, misrepresentations, or omissions made by me on the application or during the application process shall be grounds for refusal to be admitted into the Lone Star College-Tomball Alternative Teacher Certification Program.
- ◆ I certify that the statements made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that any false statements, misrepresentations, or omissions made by me on the application or during participation in the program shall be grounds for dismissal without refund or readmission.
- ◆ I understand that I will be subject to a criminal background check by independent school districts before Early Field Based Experience and the State Board for Educator Certification before being issued a Teaching Certificate.
- ◆ I hereby authorize Lone Star College-Tomball to investigate, through whatever means deemed appropriate by the college, any information included in this application and facts resulting from the investigation unless otherwise noted. Lone Star College-Tomball is also authorized to use any information obtained from its investigations to determine my suitability for entrance into the Alternative Teacher Certification Program. I release Lone Star College-Tomball from any liability in connection with the investigation.
- ◆ I hereby authorize any former employers or any other persons given as references (unless otherwise noted) to answer any questions that may be asked.
- ◆ I understand meeting eligibility requirements does not guarantee an interview or acceptance into the Tomball Alternative Teacher Certification Program.
- ◆ I understand that there is no tuition refund if I am unable to complete the training requirements. I understand that students must officially withdraw before class begins in order to receive a refund. Otherwise, no refund will be given.
- ◆ I understand the program is an intensive fast track designed to be completed in 12-24 months.
- ◆ Your acceptance into this program is dependent on you successfully passing a criminal background check by an approved LSCS vendor.

If accepted, I agree to abide by the policies, procedures, rules, and regulations of Lone Star College-Tomball and the Alternative Teacher Certification Program.

Signature of Applicant: _____

Date: _____