APPLICATION Where are you applying? □act♦houston □act♦dallas □act♦austin How did you hear about us? □Online/Internet □ Friend/ISD/Personal Referral □Job Fair ☐ Postcard Print name What would you like to teach? Grades \Box EC-6 \Box 4-8 \Box 7-12 Subject(s)_____ PERSONAL INFORMATION Social Security #_____-____ Complete Name: Maiden Name: _____ Date of birth: / / _____ U.S. citizen: □Yes □No Gender: □M □F Military Veteran: □Yes □No **Ethnicity:**

Hispanic or Latino ☐ Not Hispanic or Latino ☐ American Indian or Alaska Native ☐ Black or African American □ White □ Asian ☐ Hawaiian or other Pacific Islander ☐ Two or more races Mailing Address: __ Apt. # city zip code Phone #s: Home: e-mail address: **TEACHING INFORMATION** Are you now: ☐ Teaching ☐ Substitute teaching ☐ Working as para-professional or teacher aide? If yes, list School/District _____ How long? _____ If yes, name of teacher preparation program(s) _________________ Passed? □YES □NO Name of TExES/ExCET exams taken: List any permits or certificates held in other states or countries. (include subject, grade level, school district, state, dates) EDUCATIONAL BACKGROUND Provide the following information for all colleges, universities, junior or community colleges attended. <u>Dates Attended</u> <u>Institution</u> Degree Major/Minor CHARACTER REFERENCES Provide names, addresses and phone numbers for 3 personal character references not related to you.

PERSONAL POINT-OF-VIEW In your own handwriting, describe what you as development as a teacher throughout your first	a person will bring to teaching. Explain how that will support your tyear of teaching.
DISCLOSURE OF LEGAL HISTORY:	Score:
Have you ever been convicted of a felony or sub- lf your answer is "YES", please explain on a Note: Before hiring, school districts will conduct of	ojected to a deferred adjudication on a felony charge? NO U YES Use separate sheet of paper. The criminal records check. A criminal record will jeopardize your eligibility for
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Idave you ever been convicted of a felony or substitute and participation in this programmer. ACKNOWLEDGMENTS AND DISCLAIMERS ◆ I have answered all questions contained in the another Preparation Program Institute session ◆ I hereby give permission for this educator certain and contents of my application to prospect the program in the state as required by changes made at the state 1. Have prior unsuccessful attempts on an 2. Have been unsuccessful in completing	Djected to a deferred adjudication on a felony charge? NO YES a separate sheet of paper. It is actiminal records check. A criminal record will jeopardize your eligibility for gram. A false statement on this application will disqualify you from admission this application truthfully to the best of my ability. It is application truthfully to the best of my ability. It is application truthfully to the best of my ability. It is application truthfully to the best of my ability. It is application truthfully to the best of my ability. It is application truthfully to the best of my ability. It is application truthfully to the best of my ability. It is application truthfully to the best of my ability. It is application truthfully to the best of my ability. It is application program to refunded after I have started the Institute. In the institute on, but will not be refunded after I have started the Institute. In the institute of the Institute of the Institute of the Institute of the Institute. It is application program reserves the right to make adjustments to requirements/program level. The program if any of the following apply: The program is a deferred and in the program in the program is a program in the progr

Please schedule an appt. & bring completed application with official transcript(s) showing all coursework/grades/credits to the location in your area. At the appointment you will receive information on our program performance over time and on the effect of supply & demand forces on the educator workforce in Texas. All your questions will be answered!

act ♦ houston 9301 Southwest Freeway, Suite 250 Houston, TX 77074 Tel: 832-200-0552 FAX 832-200-0549 act ♦ dallas 1420 W. Mocking bird Lane, Suite 260 Dallas, TX 75247 Tel: 214-267-2222 FAX 214-267-2273 Toll-free: 1-877-286-0024 (This location is a satellite of act ♦ dallas which maintains certification records.)

<u>www.acthouston.com</u> <u>www.act-dallas.com</u> <u>www.act-austin.com</u>

No guarantee of certification is implied by admission into the program or completion of an internship /clinical teaching practicum.

This application will be kept on file for a period of twelve months following the date of application.