

Application for Certified Teachers

Application Type: <input type="checkbox"/> Additional License <input type="checkbox"/> Extend Current License				Application Date:			
First		Middle	Last		Previous Last		
Address			City		State	Zip	Country
Home Phone		Cell Phone		Email			
Gender Male <input type="checkbox"/> Female <input type="checkbox"/>		Social Security #		Date of Birth		Place of Birth	
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino				Are you a Veteran?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Race: <input type="checkbox"/> African American or Black <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White				Are you a US Citizen?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
				If no, are you authorized to work for all US Employers?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
License Requests: <input type="checkbox"/> Special Education <input type="checkbox"/> Regular Education <input type="checkbox"/> Content (subject) Area <input type="checkbox"/> Bilingual Endorsement							
Level (Grades): PK - 3 rd PK - 6 th 1 st - 8 th 6 th - 12 th							
Current Teaching Position			School				
Position:			District				
Grade:			School Type: Public Charter Choice				
Subject:			Religious Private				
Have you ever applied to the MTEC program? Yes <input type="checkbox"/> No <input type="checkbox"/>			Have you enrolled in any other certification or degree programs that you did <u>not</u> complete? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, name of program				
Name of College/University			Graduation Year/GPA		Degree Earned		
Current Wisconsin Certifications					DPI File Number:		
Start Yr	End Yr	License Type	Position level		Subject		
How did you hear about MTEC: <input type="checkbox"/> Website <input type="checkbox"/> Flyer <input type="checkbox"/> DPI <input type="checkbox"/> Friend/Family <input type="checkbox"/> Information Session <input type="checkbox"/> Principal/Administrator <input type="checkbox"/> Other please specify _____							

By signing this form I certify that to the best of my knowledge the responses on this application are correct and complete. Milwaukee Teacher Education Center (MTEC) has my permission to verify any information on this form.

Signature

Date

Milwaukee Teacher Education Center (MTEC) is an Affirmative Action Opportunity Employer that complies with the provisions of the Americans with Disabilities Act. MTEC administers all of their educational, administrative and other policies without discrimination because of race, creed, color, national or ethnic origin, age, gender, sexual orientation, ancestry, handicap/disability, military or marital status.