

Thank you for your interest in Stetson University's Education Program. Please review this application, complete the bottom portion, and return the completed form to Davis Hall, 114. When this is accomplished, you will be considered for admission to the Education Program. **Be sure to submit your application for admission to the Education Program as soon as possible.** Transfer students should do this during their first semester in residence. It is the student's responsibility to meet all criteria and deadlines.

**Admission to the Education Program**

You must be accepted into the Education Program before enrolling in upper-division education courses. Before the Undergraduate Council will consider your application for admittance, you must:

1. complete an application to Stetson University's Approved Education Program;
2. complete a **Candidate Acknowledgment of Professional Expectations**;
3. present a minimum 2.5 grade point average for all college work taken at Stetson;
4. present a grade of C or higher in at least one Writing Enhanced course;
5. present a passing score on all sections of the **FTCE General Knowledge** test;
6. earn a grade of C or better in **EDUC 245H, EDUC 255S, EDUC 265**, and all other professional education courses;
7. present a minimum **2.5 grade point average** in specialization courses (major field of study);
8. complete a successful interview with members of the Undergraduate Council, if a review of performance in foundation courses suggests weaknesses;
9. join **FFEA** for elementary education candidates or **CNAFME** for music education candidates;
10. follow the **Degree Audit Planner**. **ALL** students **MUST** meet with their education advisor every semester;
11. review the *Undergraduate Student Handbook*;
12. purchase a subscription to *LiveText* (department student management and assessment system).

**Note:** At any checkpoint in your program, if there is a concern about your appropriate progress, you may be required to meet with an education faculty committee before continuing. Background checks are required prior to any field placement.

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By checking this box, I accept the responsibility for following the requirements as listed above.

\_\_\_\_\_  
**Your Name**

\_\_\_\_\_  
**ID Number (800)**

\_\_\_\_\_  
**Permanent Address (street)**

\_\_\_\_\_  
**Cell Phone Number**

\_\_\_\_\_  
**(city, state, zip code)**

\_\_\_\_\_  
**Today's Date**

\_\_\_\_\_  
**Student Signature**