

# Advanced Educator Certification Tracking Form

A \$100.00 Application Fee will be charged to your MySFA Account.

**PLEASE FILL IN ALL BLANKS. Incomplete information will delay processing.**

Date: \_\_\_\_\_ S.S.N. \_\_\_\_\_ \* Campus ID#: \_\_\_\_\_  
\*Found at "mySFA" on the SFASU website - Not SSN

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street or Box # City State Zip

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Current Employer: \_\_\_\_\_ Work Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender :  M  F Email address \_\_\_\_\_  
(required)

Ethnicity:  Hispanic/Latino of any race  American Indian or Alaska Native  Asian  Black or African American  
 Native Hawaiiin or Pacific Islander  White  Two or more races

<b>PROGRAMS:</b>	
Education Diagnostician	Master Math Teacher (4-8)
Reading Specialist (EC-12)	Master Math Teacher (8-12)
Principal: 18 Hour Program	Master Reading Teacher (EC-12)
Principal: 30 Hour Program	Master Science Teacher (4-8)
Superintendent	Master Science Teacher (8-12)
School Counselor	
Visually Impaired	

**GRE Scores:** V \_\_\_\_\_ Q \_\_\_\_\_ W \_\_\_\_\_ T \_\_\_\_\_

**GPA:** Overall \_\_\_\_\_ GPA Last 60 hours \_\_\_\_\_ Estimated Completion Date: \_\_\_\_\_  
(2.75 or greater see TAC 227.10 for exception rules) - GPA can be found on graduate application

**Upon completion of this form, you must submit this application to your Program Coordinator for his/her signature.**

**FOR OFFICE USE ONLY:**

Program Coordinator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Program Coordinators: Please scan and email completed and signed form to:  
snyderke1@sfasu.edu Attn: Katie Snyder

Entered into EdPrep  GPA Worksheet Date: \_\_\_\_\_