

Educational Background

List all colleges and/or universities attended:

School Name	Years attended	Degree earned	Major/minor
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please contact each school attended to request an official transcript be sent to:

Director of OCECA
Southern Illinois University Edwardsville
Founders Hall, Room 1110, Box 1062
Edwardsville, IL 62026

Your file will not be evaluated until official transcripts from all schools attended are received in our office:

Please return this form along with:

- A copy of your existing Illinois teaching certificate.**
- Letter(s) from building or district administration verifying teaching experience, including length of service and grade levels taught.**
- Check for \$50.00 made payable to SIUE. This fee will be refunded to your student account if you enroll in classes at SIUE within one year of the evaluation.**

I certify that the statements I have made on this request are correct and complete.

Signature

Date