

Application for Admission
To the Special Education Certification Only Program
At Idaho State University

Department of Educational Learning and Development
Idaho State University
921 S. 8th Ave. Stop 8059
Pocatello, ID 83209-8059
Contact Person Dr. Gail Coulter
Office Phone 208.282.5397
Email coulgail@isu.edu

Your Name: _____ Date: _____
Address: _____
Phone: _____ (home) _____ (other)
Bengal ID: _____

Note: To participate in this program, you must already hold a BA or BS degree in some field. You must complete the following before being accepted into the program. You must be admitted to the program before taking courses or during the first semester of course work whether the courses are taken from CSI or ISU.

- **Admitted to ISU as a Special Graduate as an Intent (I) to major in Human Exceptionalities**
- **Attach transcripts from prior degree of granting institution(s). These transcripts must be clearly legible. You may use unofficial transcripts at the time of application, but you will need to have official transcripts on file.**
- **Attach a copy of all other transcripts , if applicable, including any from ISU and CSI for verification purposes.**
- **Attach 2 letters of reference. See below for details.**
- **Fill out and attach demographic information (i.e., last page of this application).**

Please provide the following information to indicate whether or not you have met the admission requirements for the Program (do not check boxes, just fill in blanks):

- **Overall GPA (must be 2.75 or better) for prior degrees.
Provide GPA _____**

- **Letter of References** from two sources who are not related to you who knows your work history, academic history, or involvement with adults or children/ youth with disabilities (e.g., principle of a school, professor or instructor of courses, department or program chair, employer, direct supervisor, etc.) (Attach letters to this application.)

- **FBI Background Check Completed**
Date verified through Advising Center _____

Signature from Dean's Office

I attest that the information I have provided is, to the best of my knowledge, a true and accurate reflection of my accomplishments to date. I understand that information reported here that is inaccurate may be grounds for dismissal from the Special Education Program.

You will be required to participate in an interview process before being fully admitted into the program. You will be contacted as to when this will occur.

Applicant Signature: _____

Date: _____

Program Use Only:

- Admitted to Idaho State University as Special Graduate Yes ____ No ____
- Major - Human Exceptionality (Intent) Yes _____ No _____
- GPA for undergraduate degrees: _____
- Transcripts submitted: (Institutions) _____
- Two letters of reference: 1 _____ 2 _____
- FBI background check: Date verified _____

Results of Interview Met Standard Did Not Meet Standard
Committee Decision:

- Admit
- Admit with conditions: _____

- Deny, invite reapplication at later date: _____

- Deny, reason: _____

Advisor Assigned: _____

Signature of Program Director: _____ Date: _____

- Letter sent to student on: _____ (date)
Place copy of this letter in student's file, along with this application.

Certification-Only
Demographic Information

Date _____

Name _____ (Please print)

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____

BA/BS (circle one) Institution granting degree

Are you currently certified in some area? Yes No (circle one)

If yes - Type of certification _____

State where certification is held _____

Employed by a school: Yes No (circle one) If yes – in what capacity

Name of school (If 'yes' to the preceding question)
