

BEMIDJI STATE UNIVERSITY
Records & Registration Office
 Deputy Hall, Room 101, #12
 1500 Birchmont Dr.
 Bemidji, MN 56601
 218/755-2020 Fax: 218/755-4409
 records@bemidjistate.edu

Teacher Licensure Curriculum Approval Form

This form is used to verify the approval and completion of coursework needed for a teaching license when licensure is not accompanied by degree completion. The form needs to be signed by the Subject Matter Expert (SME), the SME Department Chair, and the Professional Education Department Chair before it is forwarded to the Records & Registration Office.

Name: _____ **ID #:** _____

Date: _____

Address: _____

E-mail: _____

Phone: _____

Licensure Area Subject: _____ **SSSSSSSSSSSSSSSS; fUXY@Yj Y** _____

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Attachments:

1. If coursework at another institution is being used to fulfill any of the required curriculum for this license, copies of transcripts must accompany the application, and official copies must be on file in the Records Office.
2. If you are currently, or previously have been licensed in Minnesota, a copy of that license must accompany this application. Copies are available at the following website:
http://www.education.state.mn.us/MDE/Teacher_Support/Educator_Licensing/View_an_Individual_Educators_License/index.html
3. Copies of any standardized test scores required for this license must accompany this application, and official scores must be on file in the Records Office.

Test _____	Test Date _____	Score _____
Test _____	Test Date _____	Score _____
Test _____	Test Date _____	Score _____
Test _____	Test Date _____	Score _____
Test _____	Test Date _____	Score _____

Applicant Signature _____ Date: _____ Approved Denied

SME Signature: _____ Date: _____ Approved Denied

SME Dept. Chair Signature: _____ Date: _____ Approved Denied

Professional Education Dept. Chair Signature: _____ Date: _____ Approved Denied

