

Delta State University

Master of Arts in Teaching

2010-2011 Coversheet for Admission Application Portfolio

All MAT application materials should be submitted at the same time to Dr. Angela Bridges at Delta State University. Test scores should be enclosed in sealed official envelopes. An application is not considered complete and cannot be processed until all transcripts, test scores, and application materials are received.

Please check all that are appropriate to indicate that this application is completed:

- _____ 1. The following 3 pages of the application form have been completed.
- _____ 2. I have completed and submitted an official application to the Delta State University Office of Graduate Studies and have requested that transcripts be sent to that office.
- _____ 3. Enclosed is my application portfolio with all requested components: Letters of reference, completed transcripts of undergraduate degree, and Praxis test scores.
- _____ 4. Check the one that applies:
- A. Enclosed is a copy of the official report of my Praxis I scores. Praxis I Scores: _____
- B. I completed the Praxis I on _____ and have requested that the scores be sent to Delta State University. Praxis I score: (as recorded from on screen at time of exam) _____.
- _____ 5. Check the one that applies:
- A. Enclosed is a copy of the official report of my Praxis II score(s):
- Specialty area _____ Score _____
- Specialty area _____ Score _____
- B. I completed the Praxis II on _____ and have requested that scores be sent to Delta State University.
- _____ 6. Check the ones that applies:
- A. I am interested in obtaining the five-year alternative route license.
- B. I am not interested in earning the Master of Arts in Teaching degree.
- C. I am interested in earning the Master of Arts in Teaching degree.

The school or district where I plan to secure a teaching job for 2010-2011 is

_____.

Applicant's Name Printed

Applicant's Signature

Date

Delta State University

Masters of Arts in Teaching Program

Application for Admission

Please type or print your response on this application.

Name _____ Social Security Number _____

Address _____

Home Phone _____ Other Number _____

Birth Date _____ Email address: _____

In case of emergency, contact:

Name _____ Number _____

Educational Background

List all colleges and universities attended in chronological order, beginning with the most recently attended institution.

College/University	Location	Dates Attended	Degree	Major	Overall G.P.A.

Employment Background

List in chronological order full-time employment positions held thus far, beginning with the most recent. Listing implies permission to contact former and current employers.

Employer	Name of Supervisor	Phone Number of Supervisor	Location	Your Position/Title	Dates of Employment

References

Provide the names and contact information for the three individuals who wrote reference letters for you.

Name	Position	Address	Phone Number(s)	Relationship to You

Experiential Learning

In each section, list and briefly describe, if necessary, your life experiences that may contribute to your effectiveness as a teacher.

A. Volunteer and/or service activities Dates

B. Organizations/Affiliations Dates

C. Hobbies and Interests Dates

D. Awards and Honors Dates
