

**APPLICATION FOR CONSIDERATION OF TEACHING EXPERIENCE  
IN LIEU OF STUDENT TEACHING**

All the documents listed below should be submitted to Mary Lanier in Rm. 202-Ball Hall Education building. **NOTE: Please make a copy of your packet before submitting it to our office. The documents listed below WILL NOT be returned to you.**

**Graduate Non-Degree-Licensure Students ONLY** – Please submit No. 1 through 9 between June and September.

**MAT Degree-Seeking Students ONLY**-Please submit No. 1 through 5 by the graduation deadline date AND No. 6 through 9 between June and September. Candidates **MUST** pass all Praxis II exams including the Principle of Learning and Teaching by the graduation date. If you have not taken all exams, please provide me with a copy of your registration ticket. *Please note that MAT Candidacy Forms cannot be SENT forward to the Graduate School unless the Application for Consideration of Teaching Experience in Lieu of Student Teaching has been approved by Ms. Lanier.*

**MASTER CANDIDACY FORM** should include this statement: **“Teaching experience approved in lieu of Student Teaching and Seminar” in the Course Title Section.**

1. Please submit **Application for Consideration of Teaching Experience** in lieu of Student Teaching form.
2. Submit a typewritten letter requesting use of teaching experience in lieu of student teaching. Please make sure you sign your letter. **(One paragraph minimum)**
3. Provide evidence of school-based mentoring (e.g. collaborative logs, mentoring journal, observation record OR letter from mentor and administrator).
4. Provide your teacher evaluations for at least one year. **(Comprehensive Assessment Summative Report)**. **NOTE: If you submitted an evaluation for admittance to the Teacher Education, please submit one from current school year.**
5. Xerox copy of Praxis II scores **(all required exams associated with your licensure area INCLUDING the Principle of Learning and Teaching exam. These exams must be PASSED prior to submission of this application)**.
6. Experience Verification Form –**For Memphis City Schools employees, please complete this form**  
<http://www.mcsk12.net/HR/forms/Verification%20Request%20for%20Teaching%20Experience.pdf> and submit it to MCS Verification Office located at 2597 Avery-Rm. 164: For Shelby County Schools, please contact Ms. Debbie Cannady. All other school districts must contact your Human Resource Department.
7. Complete licensure forms (Gray Sheet (TN Teaching Application) and Yellow Sheet (Instruction Sheet) which are available at the front desk in Rm. 202-Ball Hall Education building.
8. Please submit an **OFFICIAL TRANSCRIPT** from The University of Memphis. **(Undergraduate transcripts are ONLY required for individuals that taught at a private institution for 3 or more years.** You can obtain an official transcript from Rm. 003-Wilder Tower. It can take up to 5 days to get an official transcript. **NOTE: Please have all transcripts sent to your home. Transcripts stamped “Issue to Student” are acceptable.**

## APPLICATION

DATE OF APPLICATION: \_\_\_\_\_

NAME: \_\_\_\_\_ UUID: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

HOME	WORK	CELL/ALTERNATIVE
PHONE: _____	PHONE: _____	PHONE: _____

UNIVERSITY EMAIL ADDRESS: \_\_\_\_\_ @memphis.edu

ALTERNATIVE EMAIL ADDRESS: \_\_\_\_\_

**TEP** – Full Admission  Yes       No       Alternative Admissions:

**CHECK ONE:** M.A.T. Degree seeking \_\_\_\_\_ Graduate Non-Degree (Licensure only) \_\_\_\_\_

**INITIAL ENDORSEMENT: (Circle Area)**

Elementary Grades K-6    Secondary\*    Special Education\*\*    Early Childhood (PreK-3 )    Art

Music    Physical Education    Middle Grades 4-8/Special Education Modified K-12    ESL PreK-12

\*Secondary Students – Please specify subject area: \_\_\_\_\_

**\*\*SPED ONLY:**

Licensure (Check One):  Modified       Comprehensive       Early Childhood

Current classroom is:

**TEACHING EXPERIENCE**

Are you currently teaching at a public \_\_\_ or private school \_\_\_? For how long \_\_\_\_\_

**NOTE: Teachers without a Transitional license must teach at a private school for 3 years.**

Which **school district** are you currently teaching for? \_\_\_\_\_

What is the name of the **school** where you currently teach? \_\_\_\_\_

**TEACHING LICENSE**

What type of license do you currently hold?:

- Transitional License \_\_\_\_\_
- Private school without a license (3 years required) \_\_\_\_\_

How long have you taught on a Transitional (Alternative ) license? \_\_\_\_\_? **NOTE: To waive student teaching and graduate with your master's degree, it must be a total of 200 days (10 months).**

Please read and sign the following statement of verification and understanding.

I understand that this application is a request for acceptance of my teaching experience in lieu of the student teaching experience as required by my program and that its acceptance does not exempt me from any other requirements of my designated University of Memphis program.

I understand that this application is NOT an application for teacher licensure.

I understand that in order to be recommended for teacher licensure I must meet all requirements of both the University of Memphis and the Tennessee Department of Education. **I understand it is my responsibility to verify that all requirements have been met and that the University of Memphis is not responsible if I do not met the stated requirements.**

I attest that all information given on this application is a true and accurate account of my current status. I give my permission for the information contained in this application to become part of my program records and may be used by those professional educators responsible for evaluating my eligibility to obtain a teaching license in the State of Tennessee.

Signature \_\_\_\_\_ Date \_\_\_\_\_