



# APPLICATION

## PERSONAL INFORMATION

### 1. Complete Name

\_\_\_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Last First MI

Please provide other names used (when applicable): \_\_\_\_\_

### 2. Mailing Address

\_\_\_\_\_ Street City State Zip Code

### 3. Pertinent Numbers

Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Best Time to Be Reached: AM/PM

### 4. The following information is required for reporting information to the State Board of Educator Certification:

E-mail Address: \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Circle One: M F Ethnicity: Hispanic/Latino Non-Hispanic/Latino U.S. Citizen? Yes No

Race: American Indian/Alaska Native Asian Black/African American Native Hawaiian/Pacific Islander White

### 5. Have you participated in any other teacher preparation program(s)? Y N If Yes: \_\_\_\_\_

Have you taken a TExES exam? Y N If yes, details: \_\_\_\_\_

Specify permits or certificated held in other states or countries (subject, grade level, school district, state, dates)

\_\_\_\_\_

### 6. Have you or your spouse served in the military? Y N Are you willing to relocate? Y N

## EDUCATIONAL BACKGROUND

### 7. Provide the following information for all colleges, universities, junior or community colleges attended.

<u>Institution</u>	<u>Dates Attended</u>	<u>Degree</u>	<u>Major/Minor</u>	<u>GPA</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**ACKNOWLEDGEMENTS AND DISCLAIMERS**

\_\_\_\_\_ **DISCLOSURE OF LEGAL HISTORY:** Employing school districts will conduct a FEDERAL & STATE criminal records initial check when you apply to the district. A criminal record will jeopardize your employment opportunities and could terminate your participation in our program.

\_\_\_\_\_ I understand that any false statements recorded on this application may result in dismissal from our program.

\_\_\_\_\_ I hereby give permission for this program to access my educational records at TEA / ETS /previous school district employers and release contents from this application and my educational file to prospective employing school districts.

\_\_\_\_\_ I understand that fees for the institute are non-refundable once materials are issued.

\_\_\_\_\_ I understand that EPIC reserves the right to make adjustments to requirements/program as required by changes made at the state level.

\_\_\_\_\_ I understand that EPIC does not guarantee job placement. It is my responsibility to secure employment; nor does EPIC guarantee that I will pass my teacher exams required for certification.

\_\_\_\_\_ I understand that there is no guarantee of certification implied by acceptance into the program or completion of an internship year.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please forward the completed application, official (sealed) transcript(s) and \$75 non-refundable application fee to:

**YES, Inc.**  
511 Fredericksburg Road  
San Antonio, TX 78201