



College Verification Form

Career Development Program

This form is required for an applicant with a provisional certificate through the Career Development Program who is applying for standard certification. Section B must be completed by an Oklahoma college.

»» A: THIS SECTION TO BE COMPLETED BY THE APPLICANT

Name: _____

Last First Middle Maiden

Social Security Number:

»» B: THIS SECTION TO BE COMPLETED BY AN OKLAHOMA COLLEGE EDUCATION DEPARTMENT

I, _____, can confirm that the following courses were passed by the educator listed above *at this college*, and are part of an educator preparation program in (select one):

(College Education Department Official)

- Early Childhood Elementary Education Special Education

Course Code	Course Name	Credits Earned (Semester Hours)	Which of these courses address reading instruction? (check box)
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

Total Credits Approved:
(12 are required for this program)

Print Name (Education Department Official) Title Signature (Education Department Official) Date

College or University (and State if not OK) Phone Number Email Address