

## **Application Packet for Admission to a University of Kentucky Advanced Level Educator Preparation Program**

Application packets should be submitted to: Office of Academic Services and Teacher Certification, 166 Taylor Education Building, Lexington, KY 40506-0001  
(859) 257-4112, e-mail: [teb166@uky.edu](mailto:teb166@uky.edu)

All applications to advanced educator preparation programs that are accredited and approved by the Kentucky Education Professional Standards Board must be reviewed and accepted by:

- 1) The Program Faculty that Governs the specific advanced level program
- 2) The UK Educator Preparation Unit, through the Office of Accreditation and Compliance, 166 Taylor Education Building.

Approved applications for candidates who are accepted into an advanced level education program at UK must be recorded with the Education Professional Standards Board in a timely manner.

Candidates whose approved applications have not been recorded with the EPSB cannot be recommended for the appropriate EPSB certification action upon completion of the program.

A complete application packet includes the following:

1. Completed Data Portion of this Page
2. Completed Character and Fitness Review Form
3. Completed Basic Information Form (pp 1 & 2)
4. Photocopy of Signed and Dated Curriculum Contract
5. Photocopy of Educator Certificate (License), if Active Public Educator

Date:

Candidate Last Name:

Candidate Middle Name:

Candidate First Name:

Candidate Birth Name:

Title of Educator Preparation Program:

Acknowledgement: I have applied for, and been approved for admission to the above UK Educator Preparation program which leads to an educator certification action by the EPSB. I acknowledge that UK will notify the Education Professional Standards Board of my admission to this program.

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

Program Acknowledgement: The above candidate has been reviewed by the following Program Faculty at the University of Kentucky:

The candidate has been approved by the program faculty for admission to this program.

Program Faculty Representative

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

# Character and Fitness Review

11/05/2014

Return to: Academic Services and Teacher Certification, College of Education, University of Kentucky  
Lexington, KY 40506

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_  
(street) (City) (State) (zip)

Telephone Number: \_\_\_\_\_  
(Area Code)

Answer each question by circling "yes" or "no." If you answer "yes" to any question, you must submit a full explanation using a separate sheet of paper.

1. Have you ever held, or currently hold, a professional certificate, license, credential Yes No  
or other document issued to you by any jurisdiction (other than Kentucky) within the United States or abroad?

If yes, please enclose a copy of the following:

State or Jurisdiction \_\_\_\_\_ Certificate Number \_\_\_\_\_

Type \_\_\_\_\_ Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

2. Have you ever had a professional certificate, license, credential, or any document Yes No  
issued to you for practice denied, suspended, revoked, or voluntarily surrendered?
3. Are you currently being reviewed or investigated for purposes of such action Yes No  
as stated in #2 or is such action pending?
4. Have you ever been dismissed, resigned, or asked to resign/retire or discharged Yes No  
from a professional position or military service for immorality, incompetence, willful neglect of duty, misconduct, or  
presenting false information toward obtaining the position?
5. Is any such action as stated in #4 pending? Yes No
6. Have you ever been convicted of a felony or misdemeanor (other than a moving Yes No  
traffic violation), been found guilty or entered a plea or nolo contendere (no contest), even if adjudication was withheld,  
in Kentucky or any other state?

**If you responded "no" to Questions 2-6, skip Question 7.**

7. If you indicated "yes" to any of items #2 through #6, has that conviction been Yes No  
reviewed by the Education Professional Standards Board?

\_\_\_\_\_  
(Date of Review)

I affirm and declare that all information given by me on this form is true, and correct, and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in the denial or revocation of my teaching certificate. Further, I understand that KRS 161.120 provides that a teaching certificate may be revoked at any time upon determination that false information was presented toward obtaining a teaching certificate.

I declare that I understand the standard for personal and professional conduct expected of a professional educator in Kentucky. I further certify that I have read and examined the CODE OF ETHICS applicable to school personnel, understand its provisions, and agree to abide by its terms during the course of my career as a professional educator.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



### Advanced Program Basic Information Form

Academic Services and Teacher Certification: College of Education; University of Kentucky;  
166 Taylor Education Building; Lexington, KY 40506-0001; Phone (859) 257-4112

**Today's Date:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Middle Name:** \_\_\_\_\_ **Birth Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZIP Code:** \_\_\_\_\_

**Phone**  
Permanent: \_\_\_\_\_ Work: \_\_\_\_\_ Other (Specify type: \_\_\_\_\_ )  
( ) - ( ) - ( ) -

**Gender:**  Female  Male  
**Birthdate:** \_\_\_\_\_

AD account. Example: AD\xxxxx: (This is your original UK email address.)  
\_\_\_\_\_  
UKID # (ex: 9#####): \_\_\_\_\_ SSN: \_\_\_\_\_  
(required for EPSB admission)

**Ethnicity (OPTIONAL)** (check only one):  
 American Indian  Asian or Pacific Islander  Alaskan Native  
 Black, Non-Hispanic  Hispanic  Mexican American or Chicano  
 Puerto Rican  White, Non-Hispanic  Two or More

**Citizenship**  
 U.S.A.  
 Other  
Specify other: \_\_\_\_\_

**Secondary Diploma** (check one)  
 U.S. High School  GED  Home Schooling  Foreign (Country: \_\_\_\_\_)  
**Diploma State:** \_\_\_\_\_ **Year:** \_\_\_\_\_ **High School:** \_\_\_\_\_ **High School City:** \_\_\_\_\_ **High School County:** \_\_\_\_\_

**Academic History**

- i. Please indicate all academic institutions you have attended **besides** the University of Kentucky.
- ii. Please indicate any **degrees** you have obtained **from** the University of Kentucky.

FULL NAME: \_\_\_\_\_

UK ID: \_\_\_\_\_

**Institution Name:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Country** \_\_\_\_\_

**Attendance Dates From** \_\_\_\_\_ **To** \_\_\_\_\_

**Hours Completed** \_\_\_\_\_ **GPA** \_\_\_\_\_ Undergraduate \_\_\_ Graduate \_\_\_ Mixed

**Did you complete a degree?** Yes \_\_\_ No \_\_\_

**If yes, what type?** Associate \_\_\_ Bachelor \_\_\_ Masters \_\_\_ Doctorate \_\_\_ Professional \_\_\_

**Were you in a teacher certification program?** Yes, completed \_\_\_ Yes, not completed \_\_\_ No \_\_\_

**Subject Areas:** \_\_\_\_\_ Major \_\_\_ Minor \_\_\_ Other \_\_\_

\_\_\_\_\_ Major \_\_\_ Minor \_\_\_ Other \_\_\_

\_\_\_\_\_ Major \_\_\_ Minor \_\_\_ Other \_\_\_

**Institution Name:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Country** \_\_\_\_\_

**Attendance Dates From** \_\_\_\_\_ **To** \_\_\_\_\_

**Hours Completed** \_\_\_\_\_ **GPA** \_\_\_\_\_ Undergraduate \_\_\_ Graduate \_\_\_ Mixed

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**Subject Areas:** \_\_\_\_\_ Major \_\_\_ Minor \_\_\_ Other \_\_\_

\_\_\_\_\_ Major \_\_\_ Minor \_\_\_ Other \_\_\_

\_\_\_\_\_ Major \_\_\_ Minor \_\_\_ Other \_\_\_

**Institution Name:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Country** \_\_\_\_\_

**Attendance Dates From** \_\_\_\_\_ **To** \_\_\_\_\_

**Hours Completed** \_\_\_\_\_ **GPA** \_\_\_\_\_ Undergraduate \_\_\_ Graduate \_\_\_ Mixed

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**Subject Areas:** \_\_\_\_\_ Major \_\_\_ Minor \_\_\_ Other \_\_\_

\_\_\_\_\_ Major \_\_\_ Minor \_\_\_ Other \_\_\_

\_\_\_\_\_ Major \_\_\_ Minor \_\_\_ Other \_\_\_

Attach additional pages, as needed.