

## TRANSCRIPT EVALUATION REQUEST

Name	SS #
Email	
Phone	Date

### LIST ALL INSTITUTIONS ATTENDED: (PLEASE ATTACH ALL TRANSCRIPTS TO FORM)

COLLEGE/UNIVERSITY	MAJOR	DEGREE EARNED	DATE COMPLETED

### I AM INTERESTED IN...

- License Only       Completing the M.A.T (Master of Arts on Teaching) Degree  
 Additional Licensure In \_\_\_\_\_ I hold a license in \_\_\_\_\_

### REQUEST EVALUATION FOR...

#### Special Education

- Interventionist, K-8
- Interventionist, 6-12
- Early Childhood, PreK-3
- Comprehensive, K-12

#### Middle Grades (6-8)

- English
- Math
- Social Studies
- Science

#### Elementary

- PreK-3
- Elementary, K-5

#### Secondary Education

- Business (6-12)
- English (6-12)
- Math (6-12)
- Biology (6-12)
- Chemistry (6-12)
- French (6-12)

#### All Grades

- Art, K-12
- Health/PE, K-12
- Theatre, K-12
- TESOL, PreK-12

- History (6-12)
- Spanish (6-12)
- Psychology (9-12)
- Communications (6-12)

PLEASE RETURN THIS FORM AND OFFICIAL OR LEGIBLE COPIES OF ALL TRANSCRIPTS TO  
"LEE UNIVERSITY, COLLEGE OF EDUCATION, GRADUATE PROGRAMS" AT THE ABOVE ADDRESS.