

Return Completed Application to College of Education, CLS 4044

(Please Print)

LAST NAME _____ FIRST _____ MIDDLE _____

PREVIOUS NAME (if applicable) _____

NEIU ID# _____ NEIU EMAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE (_____) _____ WORK (_____) _____ OTHER (_____) _____

BIRTH DATE: Month _____ Day _____ Year _____

Male Female

ETHNIC ORIGIN:

White (Non-Hispanic) Hispanic Asian or Pacific Islander

Black (Non-Hispanic) American Indian or Alaskan Native

HIGH SCHOOL FROM WHICH YOU GRADUATED: _____

CITY _____ STATE _____

Anticipated student teaching/internship term: Semester _____ Year _____

Major(s) _____ Minor _____

(See College of Education Program list in Undergraduate Handbook)

PREVIOUSLY ATTENDED INSTITUTIONS

Name/Campus	City	State	Dates Attended	Hours Earned	Degree Earned
1.					
2.					
3.					
4.					

(Over)

Briefly describe your responsibilities and work history specifically related to children or young people.

In your own words, explain Northeastern's College of Education philosophy based on the conceptual framework document you received in your application packet. To view and print conceptual framework information from the Web, visit neiu.edu/~edudept/mission.)

Please sign and return this "Application for Admission" to the Office of the Dean, CLS 4044.

I understand that prior conviction of certain felonies may preclude State Teacher Certification. I assert that, to the best of my knowledge, I currently do not have a record of felony conviction and agree that, should I receive a felony conviction while a student, I will notify the proper administrator. The university cannot be held liable for a failure to report.

Signature

Date

Please note: The College of Education admission, retention and appeal procedures permit students to be represented by an attorney. Any student anticipating such representation must inform the Office of the Dean of representation plans prior to the meeting with the appeal committee.