Application for Admission
Undergraduate Teacher Licensure Program

CU Student ID____________________
Name ______________________
CU Boulder Email Address ____________________________ Phone Number ____________________________

Current Undergraduate Major
What is your current undergraduate major at CU Boulder? NOTE: Open Option and Exploratory Studies students are not eligible to apply to the teacher licensure program.

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Start Term (Check One)
Select the term you will begin the teacher licensure program.
_____ Spring 2021
_____ Fall 2020

Licensure Field (Check One)
Select the licensure field you will pursue from the list below. You may only apply for one licensure area.
_____ Secondary English - Fall Only Admission
_____ Secondary Social Studies - Fall Only Admission
_____ Secondary Science
_____ Secondary Mathematics
_____ Middle School Math
_____ French
_____ Spanish
_____ German
_____ Russian
_____ French
_____ Japanese
_____ Latin
_____ Music Education

Please list other universities you have attended
________________________________________________________________________________________

Signature
By submitting your application you certify that to the best of your knowledge, the information submitted in this application is true and complete. You understand that if found to be otherwise, it is sufficient cause for refusal or dismissal. In addition, you must notify the School of Education if any information provided in this application changes after submission. You agree to all terms and conditions as discussed in this application.

You also understand that if admitted, your admission is contingent upon your final credentials reflecting academic achievement similar to the assessment at the time of your admission. If you enroll as a student at the University of Colorado Boulder, you agree to observe all campus policies and regulations, including the Honor Code, and acknowledge that you are responsible for all financial obligations incurred.

You also consent to the release of your high school transcript, letters of recommendation or any other material relevant to an admission decision to the University of Colorado Boulder.

Signature: In place of your signature, please type your full legal name if you are completing this form electronically.

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