VERIFICATION OF COMPLETION
of Teaching Major and Teaching Minor
Master of Education - Student Teaching

Secondary ☐ Elementary ☐ Special Education ☐

Semester applying for Student Teaching _____ Year ____

_____ _____
Name of Student Student ID #

_____ _____
Major or Composite Major Minor if applicable

Teaching Major, Composite Teaching Major or Minor

_____ _____ _____
Signature of Department Director Phone Ext. Date

_____ _____
Background Clearance Date

Please list any required courses still needed:
Course Semester to be taken

ATTENTION SECONDARY LICENSURE CANDIDATES:

If the Major/or Minor are not "recognized" by Utah State Office of Education, there must be an attachment to this form. This attachment will verify that the student has met the necessary requirements prescribed by USOE and/or content department in order to appropriately apply for licensure.