

# Teacher Education Departmental Examination Report

Name: \_\_\_\_\_ 927 \_\_\_\_\_

Graduate program \_\_\_\_\_

This certifies that the above named student:

- Is currently enrolled in a graduate program.
- Is in good academic standing.
- Has satisfied all prerequisites for each course listed below.
- Has made successful scores on the NBPTS Master Teacher certification process and has been awarded National Board certification.

Date certification was awarded: \_\_\_\_\_

Score on National Board certification \_\_\_\_\_ (275 or higher)

Number of Graduate hours earned \_\_\_\_\_ 9 sh \_\_\_\_\_

Courses for which credit is being awarded:

EDTD \_\_\_\_\_

EDTD \_\_\_\_\_

EDTD \_\_\_\_\_

Approval of Advisor:

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

Approval of Chair:

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

Approval of Dean:

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

The above named student has paid the departmental examination fee in the amount of \_\_\_\_\_.  
(Exams are \$5.00 per credit hour)

\_\_\_\_\_  
Signature of Business Office Official

Original to Office of Registrar/Student Records  
Copy in student file