



TEACHER EDUCATION PROGRAM OF STUDY
 NORTH DAKOTA EDUCATION STANDARDS AND PRACTICES BOARD
 SFN 53896 (03-09)

Name (Last, First, MI)		Maiden Name	
Address			
City		State	Zip Code (9-digit)
Home Telephone Number	Work Telephone Number	Date of Birth	Email Address

Educator's Professional License Number

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or

Social Security Number (do not use dashes)

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Name of Institution			
Mailing Address	City	State	Zip Code
Existing Major/Minor (attach transcripts)			
Pursued Major			

Required Coursework (based on North Dakota Teacher Education Program Approval Standards)		
General Studies	Professional Education	Content Major

Approved Signatures	
Program Advisor	Date
Teacher Education Chair	Date
Dean, College of Education	Date
Executive Director, ESPB	Date

Submit completed form to: Education Standards and Practices Board
 2718 Gateway Avenue, Suite 303
 Bismarck ND 58503-0585
 (701) 328-9641 Office
 (701) 328-9647 Fax

In compliance with the Federal Privacy Act of 1974, the disclosure of the individual's social security number on this form is mandatory pursuant to North Dakota Century Code (NDCC) 43-50-02. The individual's social security number is used by the Education Standards and Practices Board (ESPB) as an identification number for file control purposes, background checks, and recordkeeping. ESPB does not advocate, permit, nor practice discrimination on the basis of sex, race, color, national origin, religion, age, or disability as required by various state and federal laws.