



**CONTENT AREA MINOR EQUIVALENCY ENDORSEMENT –
MUSIC EDUCATION: VOCAL**
SFN 58251 (05-17)

Educator's Professional License Number

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or

Social Security Number (do not use dashes)

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

Two levels of content area endorsements are available to be added to existing North Dakota educational licensure. The Minor Equivalency (ME) 16 level requires a minimum of 16 semester hours (SH) of content-specific coursework beyond the introductory level. The ME 24 level requires a minimum of 24 SH of content-specific coursework beyond the introductory level including special methods of teaching in the content area and is considered equivalent to a full teaching minor. All coursework must be verified through transcripts from an approved college of teacher education. **The ME 16 level is issued for a maximum period of five years and is not renewable. Individuals who wish to continue to be endorsed in the area after the five-year limit must obtain the remaining requirements to complete the ME 24 level.** Please note the ME 16 is not available in some content areas.

Music Education: Vocal

ME 16 requirement: minimum of 16 SH	Content Completed:	# SH	Content Needed:	# SH
Music Theory				
Ear Training/Sight Singing				
Conducting				
Must include a minimum of 8 SH of coursework in Vocal Music				
Coursework cannot include more than 2 SH of individual and group performances.				

ME 24 requirement: minimum of 24 SH	Content Completed:	# SH	Content Needed:	# SH
Music Theory (minimum 6 SH)				
Music History or Music Literature				
Ear Training/Sight Singing				
Conducting				
Keyboard Proficiency				
Minimum 8 SH coursework in Vocal Music				
Elementary and Secondary Methods of Teaching Music				
Coursework cannot include more than 2 SH of individual and group performances.				
	Total SH		Total SH	

Please sign below and attach all transcripts along with the \$75.00 minor equivalency review fee.

Applicant:	Date
ESPB Approval:	Date

Please submit form and fee to: Education Standards and Practices Board
2718 Gateway Ave. Suite 204
Bismarck, ND 58503
(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.



Payment/Credit Card Information

Type of Payment <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Check			Amount \$ _____
Name as it appears on credit card			
<u>Credit Card Number</u> <div style="border: 1px solid black; display: flex; justify-content: space-between; height: 20px; width: 100%; margin-top: 5px;"> </div>	<u>Expiration Date</u> <div style="border: 1px solid black; display: flex; justify-content: space-between; height: 20px; width: 100%; margin-top: 5px;"> </div> <div style="text-align: center; margin-top: 5px;"> m m y y </div>	<u>3 digit CVV</u> <div style="border: 1px solid black; display: flex; justify-content: space-between; height: 20px; width: 100%; margin-top: 5px;"> </div>	
Billing Address of credit card (if different than the mailing address)			
Address: _____			
City _____ State _____ Zip Code _____			

This documentation will be destroyed upon completion of processing.