

**RANDOLPH COLLEGE**  
**Declaration of Teacher Licensure**

NAME \_\_\_\_\_  
(Last) (First) (Mid. Initial)

Grad. Year \_\_\_\_\_

Check: Elementary (pK-6)\_\_\_ Secondary (6-12)\_\_\_ Comprehensive (pK-12)\_\_\_ 2008-09 Catalog

Academic Major: \_\_\_\_\_

Core Courses	Course Title	Cr. Hrs.	Course Selected	Semester of Enrollment	Grade
EDUC 101	Foundations of Education	3			
EDUC 213	Dim Global Society	3			
EDUC 315-315P	Curriculum & Instr. pK-12 & Pract.	4			
EDUC 361	Survey of Special Education	3			
<b>Elementary</b>					
EDUC 108	Education Psyc & Classroom Mgt.	3			
EDUC 207-207P	Language and Reading & Pract.	4			
EDUC 306-306P	Reading and Writing & Pract.	4			
EDUC 312	Math/Science Methods in Elem/Mid	3			
EDUC 314P	Interdisciplinary Practicum	2			
EDUC 493	Intern Teaching	12			
<b>Total for Elementary Education</b>		<b>41</b>			
<b>Secondary</b>					
EDUC 203-203P or EDUC 204-204P	Student Leadership & Mentoring	3			
EDUC 230-230P	Reading in the Content/Literacy <sup>1</sup>	4			
EDUC 318-318P	Teaching in Subject Area & Pract.	3			
EDUC 495	Intern Teaching	12			
<b>Total for Secondary Education</b>		<b>35</b>			

<sup>1</sup> Students seeking a preK-12 license in French or Spanish, art, music, or dance may substitute EDUC 207-207P for EDUC 230-230P.

**\*Specify the course you are using to fulfill the requirement. Also use this space to list transfer courses or another course you are being allowed to substitute.**

I am aware of the specific requirements for this major and recognize that I must complete all requirements with a minimum QPR of 2.0 (rounded). I understand that I am responsible for completing successfully all courses, for determining that scheduling will allow me to fulfill requirements, including the senior program, and for obtaining approval for any courses taken at another institution.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

**For Declaration of Major:** Successful completion of this program satisfies major requirements.

Department Chair/Program Coordinator \_\_\_\_\_ Advisor will be \_\_\_\_\_

**For Application for Graduation:** Successful completion of this program satisfies major requirements.

Advisor \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_