

Master of Science in Education in Mathematics Education **Application**

For Office Use Only	Date Received:			
Application l	Essay			
	ergraduate transcript			
	ation of transfer credits, official gra		Decommondation 2	
Preferred start Date	Specialization	Recommendation 1	Recommendation 2	
Last Name	First	Name	Middle	
Preferred First Name	Name on previous i	records	Date of Birth	
Personal Email Address		Home Phone Number		
Home mailing address				
Country of Birth:		Are you a	US citizen? Yes No	
If you are a US Permanent Resident Card. A#	•	number and submit a copy (front & l	back) of your Permanent	
		crediting associations, and college g quests, we ask you to answer the foll		
Language(s) spoken at hon	ne	Are you of Franco-America	an heritage? Yes No	
Please indicate if you are H	Hispanic/Latino Yes No			
Please select one or more of	of the following racial categories to	describe yourself: American In	dian or Alaska Native	
Asian Black or Africa	can American Native Hawaiian	or other Pacific Islander White	Other	
Education and Experie	ence (check one)			
_	s an undergraduate student			
I have a bachelor's degree	•			
_				
I have a bachelor's degre	e from another institution			
		with the Maine Department of Educ		
	•	X-12 school setting?(
Number of Years Teaching _			, <u>r</u> ,	
•	current Employer			
	Department of Education certificat		Please provide a copy of your	
My endorsements are in the f	Maine DOE certification.			
Other PreK-12 experience:				
•	Pos	sition	Number of years	
District/School	Dog	sition	Number of years	

Education

Where did you receive yo	ur baccalaureate degree?				
Institution	Degree In				
Only graduate courses in	level courses that you would like to s which you received a 3.0 or above of tred for transfer. Up to 9 credits may	and were taken in the last five yea		Yes No a a regionally accredited	
Institution	Course	Gı	ade	_ Date Completed	
Institution	Course	Gı	ade	_ Date Completed	
Institution	Course	Gı	ade	_ Date Completed	
Institution	Course	Gı	ade	_ Date Completed	
graduate courses listed ab	ide official transcripts (undergraduat ove. Official transcripts must be sen all UM System school transcripts (Usubmitted.	nt directly from the above institut	ions to	the Office of Graduate Studies.	
Program Plan Preferred semester to star	t your graduate program:			Application Due Dates* August 14 for September December 9 for January April 24 for May	
Pace: I plan to complete	the program in: 2 years	3 years 4 years			
	ed on a rolling basis, and will be con r to acceptance into the program (so				
Specialization (pleas	e see catalog for descriptions)	Select one			
Leadership - Math Co	Initial Licensure	Initial Licensure			
Leadership - Math In	Leadership - Undeclar credits)	Leadership - Undeclared (must declare after completing 9 credits)			
explain how UMF's Mast words) Initial Licensure Specializ undergraduate credits) and	Essay Prompt: Begin by describing for of Education in Mathematics Education Essay Prompt: We are looking the potential to provide high quality essay describing your background,	cation will support your work as a for candidates with a strong math y mathematics instruction to stude	a mathe nematic ents in k	matics educator. (500 s background (at least 15 K-12 schools. Write a brief	
Recommendations			1		

Two recommendations are required. One recommendation must be from a university faculty member or recent school employer who can speak to your potential for completing graduate work. Please provide each reference with a copy of the blank Recommendation Form found online.