

Intent to Participate - Graduate Education Certificate Program

Please complete form and return to gradstudies@maine.edu OR fax to 207-778-8134

For more information please visit https://www.umf.maine.edu/grad-studies/graduate-education-certificate-programs

Last Nama		nformation	Mid	dla	
	First Name Previous Names (maiden name)				
Have you ever applied to or taken classes					
Date of Birth	•	•			
Email Address					
Mailing Address					
Current School District/Agency			ool		
		Number of Years Teaching			
Preferred Semester to start your coursewo	ork: Year	Fall	Spring	Summer	
Do you have a Baccalaureate Degree?	Yes	١	No		
Do you have a Master's Degree ?	Yes	Ŋ	No		
Please indicate the Grad	luate Certificate	Program in which you	intend to particip	pate:	
Administration * Do you plan to take the optional Inte	Systems of Stude	Systems of Student Support			
Math Leadership		Math Intervention	Math Intervention Specialist		
Special Education Administration		Nature-based Edu	Nature-based Education and Outdoor Learning		
English Language Learning		STEAM for Early	STEAM for Early Childhood and Elementary Educators		
Special Education Elementary		Professional Writing	Professional Writing		
Gifted and Talented Education		Human Resource	Human Resources Management		
Special Education Secondary		Climate Education	Climate Education		
Math Coaching					
*Administrative certificate applicants must submi	t evidence of two (2)	years or teaching experience			
If you have taken and UMF graduate cours have been taken in the last five (5) years, with a grad		•		-	
	——————————————————————————————————————	be applied to this program.)			
Note: Acceptance to any of the cen	tificate programs liste	d above does not constitute ac	cceptance to any UMF	graduate	
degree program. If you wish to	enroll into a graduate	e degree program, you must su	bmit a separate applica	ation.	
Signature_		Date			