



Intent to Participate - Graduate Education Certificate Program

For more information please visit <http://www2.umf.maine.edu/gradstudies/certificate/>

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

Last Name _____ First Name _____ Middle _____

Preferred Name _____ Previous names (e.g.: maiden name) _____

Have you ever applied to or taken classes at a University of Maine System School (including job applications)? _____

Gender _____ Date of Birth _____ Student ID (if known) _____

Preferred email address _____ Preferred Phone _____

Mailing Address _____

Current School District/Agency _____ Current School _____

Current Position _____ Number of Years Teaching _____

Program Plan

Preferred semester to start your coursework: Year _____	Fall
	Spring
	Summer

Do you have a Baccalaureate degree? Yes No

Do you have a Master's degree? Yes No

Please indicate the Graduate Education Certificate program in which you intend to participate:

- | | | |
|-------------------------------|----------------------------------|----------------------------|
| Administration ^a | Math Leadership | Systems of Student Support |
| English Language Learning | Proficiency Based Education | |
| Gifted and Talented Education | Special Education Administration | |
| Math Coaching ^b | Special Education Elementary | |
| Math Intervention Specialist | Special Education Secondary | |

^a Administration certificate applicants must submit evidence of two (2) years of teaching experience

^b Math Coaching certificate is only available to members of the Maine Mathematics Coaching Project (MMCP)

If you have taken any UMF graduate courses that are applicable to this certificate, please list them. (Only courses that have been taken in the last five (5) years, with a grade of B or higher, can be applied to this program.)

Note: Acceptance to any of the certificate programs listed above does not constitute acceptance to any UMF graduate degree program. If you wish to enroll into a graduate degree program, you must submit a separate application.

Signature _____ Date _____