



**ST. JOHN'S
UNIVERSITY**

**Advanced Certificate in TESOL or a Bilingual Extension
Pre-Screening APPLICATION**

Name: _____

Date: _____

Address: _____

Current School: _____

Phone (H): _____

Cell: _____

Email: _____

Educational Background:

Graduate Degree and year: _____

School where conferred and GPA: _____

Teaching Experience: Give positions and exact dates

District	School	Grade(s)	Date of Service

New York State Certification(s) held: _____

To obtain New York State Certification all TESOL candidates must have 12 college credits in one or more other languages **prior to completion** of the program. These 12 credits can be earned through on-line courses, undergraduate or graduate courses or any combination thereof. It is also possible to demonstrate language proficiency by taking the CLEP exam.

Applicant signature: _____

Principal's signature: _____ Print Principal's Name: _____