



College Verification Form

Non-Traditional Special Education (Boot Camp) Program

This form is for an applicant with a provisional certificate through the Non-Traditional Special Education (Boot Camp) Program who is applying for standard certification or for renewal of their provisional certificate.

»» A: THIS SECTION TO BE COMPLETED BY THE APPLICANT

Name: _____

Last First Middle Maiden

Social Security Number:

»» B: THIS SECTION TO BE COMPLETED BY AN ACCREDITED COLLEGE EDUCATION DEPARTMENT

I, _____, can confirm that the following courses were passed by the educator listed above and are approved as part of *this college's* traditional or non-traditional **special education** program:

(College Education Department Official)

| Course Code | Course Name | Credits Earned (Semester Hours) | Semester and Year Completed |
|------------------------------------------------------------------------------------------------------|-------------|------------------------------------|-----------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total Credits Approved: (6 credits in the last year required for renewal; 18 for standard) | | | |

Print Name Title Signature Date
(Education Department Official) (Education Department Official)

College or University (and State if not OK) Phone Number Email Address