



Educator Preparation Institute Alternative Certification Program Application



Student Contact Information

Student ID#	Last Name	First Name	MI	Term applying for
Street Address				Apt #
City		County	State	Zip
Home Phone	Cell Phone	Email Address		

Bachelor's Degree

College Name	Dates of Attendance
Location	
Major	GPA
Is the Bachelor's Degree the highest degree earned?	Yes No

Statement of Eligibility

Does the FLDOE Statement of Eligibility (SOE) state that you are eligible to teach?	Yes	No
Subject area on SOE	Expiration Date	
Do you currently hold a FL Temporary Teaching Certificate?	Yes	No
	Expiration Date	

Current Employment

Place	Position
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Have you ever been convicted of a felony? Yes No

I certify that all of the information contained in this application is true and correct. I understand that it is my responsibility to provide all necessary documentation required to process this application. Further, I also understand that submitting all required paperwork does not guarantee admission to the EPI program.

Signature: _____ Date: _____

Return completed application, documentation of passing score on the General Knowledge Exam and copy of SOE, or Temporary Certificate by mail, fax, email, or in-person to:

Florida Gateway College, Attn: Elizabeth Carroll, 149 S.E. College Place, Lake City, Florida 32025
Fax: (386) 754-4703 email: elizabeth.carroll@fgc.edu In-person: Building 27, Room 1