POST-BACCALAUREATE ENDORSEMENT PROGRAM ADMISSION REQUIREMENTS

Applicants must submit:

- Post-Baccalaureate Endorsement Program Application
- Non-Degree Graduate Application (online)
- Passing Test Scores (or the approved equivalent scores)
- Official Transcripts
- Authorization for Release of Disciplinary Records
- Professional Disposition Survey (online)

Mail Application and Required Documents To: Old Dominion University
Darden College of Education and Professional Studies
Office of Clinical Experiences
2345 Education Building
Norfolk, VA 23529

Applications
- Submit a Non-Degree Graduate Application (online)
- Submit a Post-Baccalaureate Endorsement Program Application (download and print a copy of the application)

Passing Test Scores
- Praxis Core Academic Skills for Educator Tests; or
- Approved equivalent scores as prescribed by the Virginia Board of Education; or
- Praxis I passing scores if achieved prior to December 31, 2013.

Transcripts and GPA Requirements

- Transcripts
  - Submit official undergraduate and graduate transcripts from all regionally accredited institutions attended (transcripts must be in sealed envelope from the institution)

- Regular Admission
  - Have earned a bachelor's degree from a regionally accredited institution with a minimum cumulative GPA of 2.75 for all undergraduate college credits taken prior to the award of the baccalaureate degree.

- Provisional Admission
  - Have earned a bachelor's degree from a regionally accredited institution with a minimum cumulative GPA between 2.50 and 2.74.
  - Provisionally admitted students must take at least 6 credits (no more than 12) of 300/400 upper level academic content courses at Old Dominion University as designated by the academic advisor, and pass with at least a B (3.00) in each course. This condition must be met prior to the Orientation Meeting for the Teacher Candidate Internship.

Authorization for Release of Disciplinary Records
- Complete and sign the Authorization for Release of Disciplinary Records, which is part of the application packet. All applicants are required to submit this form signed, prior to being admitted into a teacher education program.

Monarch Identification and Authorization System (MIDAS) and Professional Disposition Survey

- Activate your MIDAS ID (once you have been admitted as a Non-Degree Graduate Student). You will need to do this in order to complete the Professional Disposition Survey.
- Complete and submit the Professional Disposition Survey (online)
Old Dominion University
Darden College of Education and Professional Studies
POST-BACCALAUREATE ENDORSEMENT PROGRAM APPLICATION

Name _____________________________ SSN ________________________________ UIN __________________________
Address ______________________________________ City ___________________________ State ______ Zip _______________
Telephone (work) _____________________ (home) ____________________ E-mail ______________________ DOB:___________

Military Member:  Active     Veteran   Dependent

Online Student   Yes   No

Seeking endorsement in the area of _________________________________ Date of undergraduate degree awarded______________

Bachelor’s degree from _____________________________________ Discipline ___________________________ GPA __________
(regionally accredited institution)

Part One

1. An applicant must submit all items listed on the Post-Baccalaureate Endorsement Program Admission Requirements page:
   ✓ Post-Baccalaureate Endorsement Program Application
   ✓ Non-degree Graduate Application (online)
   ✓ Passing Test Scores (or the approved equivalent scores)
   ✓ Official Transcripts
   ✓ Authorization for Release of Disciplinary Records
   ✓ Professional Disposition Survey (online)

Part Two

1. Complete the following statements:
   • I am applying for entry into the Old Dominion University Post-Baccalaureate Endorsement Program and understand I must continue to meet the continuance and exit requirements to complete the program.  ☐Yes ☐ No ________ (initial)
   • I agree to abide by and support the rules, regulations, and honor code of the University as set forth in the University Catalog at Old Dominion University.  ☐Yes ☐ No ________ (initial)

I certify that:
• I have been convicted of a felony. ☐Yes ☐ No ________ (initial)
• I have been found guilty of a misdemeanor involving children or drugs. ☐Yes ☐ No ________ (initial)
• I have had a teaching certificate or license denied, revoked, invalidated, cancelled, or suspended. ☐Yes ☐ No ________ (initial)
• I have been the subject of a founded complaint of child abuse or neglect. ☐Yes ☐ No ________ (initial)

*If you answer “Yes” to any items above, please submit a signed explanation and attach it to this application.

Part Three

I understand that if I am admitted provisionally into the teacher Post-Baccalaureate Endorsement Program, I must take at least 6 credits (no more than 12) of 300/400 upper level academic content courses at Old Dominion University as designated by the academic advisor, and pass with at least a B (3.00) in each course. This condition must be met prior to the Orientation Meeting for the Teacher Candidate Internship.

I agree to abide by and support the rules, regulations, and honor code of the University as set forth in the University Catalog.

Signature of Applicant _________________________________________________ Date __________ ________________

DEPARTMENTAL USE ONLY

I have interviewed this candidate and make the following recommendation:

Regular Admission ______________ Provisional Admission ______________ Deny ______________

Signature __________________________ Date ______________

(Departmental Representative or Academic Advisor)

Forward to Department Chair, Program Director, or Office of Clinical Experiences Associate Director

Regular Admission ______________ Provisional Admission ______________ Deny ______________

Signature __________________________ Date ______________

(Department Chair, Program Director, or Office of Clinical Experiences Associate Director)

Rev. 8/21/2019
AUTHORIZATION FOR RELEASE OF DISCIPLINARY RECORDS

Section I. To be completed by the Student.

Name (print): _________________________________________________ UIN: _______________________

LAST    FIRST     MI

I hereby authorize the Director of Student Conduct & Academic Integrity, or designee, to release to the Associate Director of the Office of Clinical Experiences, or designee, any information contained in my student records (including copies of the records themselves) which is necessary to respond to Section II below. I understand that the information contained therein is confidential and will not be released to a third party.

Signature _____________________________________ Date ______________________________________

Do not write below this section.

TO: Director of Student Conduct & Academic Integrity

FROM: Associate Director, Office of Clinical Experiences

The above named student is applying to the College of Education to perform his/her student teaching requirement. If the student was ever subject to disciplinary action while enrolled as a student, please describe briefly, attach pertinent supporting information, and return this form to the Office of Teacher Education Services, 2345 Education Building. Thank you.

Section II. To be completed by the Director of Student Conduct & Academic Integrity or Designee

Summary of Disciplinary Action: _____________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

_____________________________________________________________________________________________

Signature _____________________________________ Date _____________________________

(person completing form)

Name ____________________________________ Title ______________________________

(print)
Darden College of Education and Professional Studies
Scholarship Opportunity

This information is being gathered to identify qualified candidates for possible competitive scholarships in the Darden College of Education and Professional Studies. Providing this information is voluntary. If you wish to be considered for this opportunity, please complete the information below. Thank you.

Print UIN, GPA, and Name of Teacher Candidate:  
UIN: _________________________ GPA: ________

Last                     First                     Middle
Initial

Are your parents/guardians graduates of the Darden College of Education?  
☐ Yes  ☐ No

If YES, what year did your parent/guardian graduate from the Darden College of Education?  
Year of graduation:  ____________

If YES, print the name of your parent/guardian below.
Print Name of Parent/Guardian:

Last                     First                     Middle
Initial

Was this the name used by the parent/guardian at the time of graduation?  ☐ Yes  ☐ No

If NO, please the name used at the time of graduation from the Darden College of Education:

Last                     First                     Middle
Initial

If YES, please indicate if they completed a program in the Darden College of Education leading to licensure in one of the areas listed below:

☐ Administration & Supervision  ☐ Reading Specialist
☐ Elementary Education PreK-6 (previously 4-8)  ☐ School Counselor
☐ Early Childhood Education PreK-3 (previously NK-4)  ☐ Speech Pathologist
☐ Health and Physical Education  ☐ Technology Education
☐ Marketing Education  ☐ Special Education, K-12
☐ Middle School Education, 6-8  ☐ Secondary Education, 6-12