



GEORGE FOX  
SCHOOL OF  
EDUCATION

# APPLICATION FOR ADMISSION

*Master of Arts in Teaching Degrees*

**George Fox University**  
**Office of Admissions**

414 N. Meridian St. #6149  
Newberg, OR 97132-2697  
503-554-2264 • 800-631-0921  
FAX 503-554-3110

[mat@georgefox.edu](mailto:mat@georgefox.edu)

•  
[mat.georgefox.edu](http://mat.georgefox.edu)

•  
**Boise Center**

1810 S. Eagle Road  
Meridian, ID 83642  
208-375-3900 • 800-749-4369  
FAX 208-375-3564

[mat.georgefox.edu](http://mat.georgefox.edu)

**NCATE**

The Standard of Excellence  
in Teacher Preparation

# GEORGE FOX UNIVERSITY

*Master of Arts in Teaching*

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## **Admission Procedure**

**The following must be furnished by the applicant.**

**You may collect all pieces and send them in one envelope:**

1. Completed and signed application form.
2. \$40 nonrefundable application fee.
3. Résumé, with focus on becoming a school teacher.
4. Character questionnaire (must use form included in this application).
5. Applicant admission statement (essay instructions are on page 4).
6. Three professional references (you must use the Professional Reference forms included in this application).  
You may collect these in sealed envelopes and enclose with your application, or provide an addressed, stamped envelope to have the form sent directly to George Fox, or have reference faxed to 503-554-3110.
7. One official transcript from each college or university attended. You may collect these in sealed envelopes and enclose with your application.

## **Return all application materials to:**

George Fox University  
Office of Admissions  
414 N. Meridian St. #6149  
Newberg, OR 97132  
503-554-2264 • 800-631-0921

*or*

George Fox University Boise Center  
Office of Admissions  
1810 S. Eagle Road  
Meridian, ID 83642  
208-375-3900 • 800-749-4369

## **Notes:**

1. George Fox University reserves the right to select students on the basis of academic performance and professional qualifications. George Fox University does not discriminate in its educational programs or activities, including employment, on the basis of age, sex, handicap/disability, race, color, national or ethnic origin, or other statuses protected by applicable nondiscrimination laws.
2. All questions must be answered, with the exception of those marked “optional.” See online catalog for full information regarding entrance requirements.
3. An interview or candidate assessment is required of applicants as part of the admission process.
4. Application materials become the property of George Fox University and are not returned or transferred to another institution.



## II. Applicant Information

Expected date of enrollment \_\_\_\_\_

Please list the names of other schools where you may be applying (*optional*).

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We would appreciate knowing how you became acquainted with George Fox University. Please be as specific as possible.

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## III. Education

Please list, in chronological order, all colleges and postsecondary institutions attended. (It is your responsibility to see that one official transcript is received by us from every school you have attended past high school.) If you enclose transcripts with your application be sure to leave them in their original sealed envelopes.

_____	Dates _____ to _____	Major _____	Degree _____
_____	Dates _____ to _____	Major _____	Degree _____
_____	Dates _____ to _____	Major _____	Degree _____
_____	Dates _____ to _____	Major _____	Degree _____

## IV. Work Experience

Employment history (give appropriate dates *and* submit a résumé with focus on becoming a school teacher)

1. Job title \_\_\_\_\_ Employer \_\_\_\_\_  
Dates \_\_\_\_\_ to \_\_\_\_\_ Supervisor's name \_\_\_\_\_ Telephone \_\_\_\_\_
2. Job title \_\_\_\_\_ Employer \_\_\_\_\_  
Dates \_\_\_\_\_ to \_\_\_\_\_ Supervisor's name \_\_\_\_\_ Telephone \_\_\_\_\_
3. Job title \_\_\_\_\_ Employer \_\_\_\_\_  
Dates \_\_\_\_\_ to \_\_\_\_\_ Supervisor's name \_\_\_\_\_ Telephone \_\_\_\_\_

**Important: List the experiences you have had (paid or volunteer) with children or youth of the age level you wish to teach. Note the length of time spent in each.**

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Depending on level and type of experience applicants may be required to show at least 30 hours recent experience in a public school classroom.

## V. References

Three references required. List professional references who can attest to your work with young people, preferably in a public school classroom. These are the same individuals you plan to have complete professional references (pages 5–10 of this application). Avoid choosing friends and family.

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail address \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail address \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail address \_\_\_\_\_

May we contact these people?  Yes  No

## VI. License Authorization Levels and Endorsements

**Step One: Select Authorizations – Check one box indicating the two authorizations you wish to earn.**

- Early Childhood & Elementary
- Elementary & Middle Level
- Middle Level & Secondary

### Authorizations Defined

*Early Childhood:* age 3 – grade 4

*Elementary:* grade 3 – 8 in an elementary school

*Middle Level:* grades 5 – 10 in a middle school or junior high school

*Secondary:* grades 7 – 12 in a middle/high school

**Step Two: Endorsements – Select up to two subject-area endorsements you wish to earn**

Check up to two boxes from the list below. All candidates for the “Elementary & Middle Level” and “Middle Level & Secondary” authorization combinations must select one content endorsement. A second endorsement may be selected and may require additional course work. Content-area qualifications must be verified via prior course work and/or Praxis II exams prior to admission.

*For questions and clarification regarding subject area endorsements, please contact the university’s MAT Admissions Office @ 503-554-2264 or 800-631-0921, ext. 2264.*

**Endorsements For All Authorizations** (you may only select one other endorsement)

- MAT Plus ESOL Endorsement  MAT Plus ESOL/Bilingual or  MAT Plus Reading Endorsement

**Content Endorsements** (teach grades 5-12 in these disciplines)

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Advanced math        | <input type="checkbox"/> Agriculture    | <input type="checkbox"/> Basic Math*      | <input type="checkbox"/> Biology                  |
| <input type="checkbox"/> Business             | <input type="checkbox"/> Chemistry      | <input type="checkbox"/> Drama**          | <input type="checkbox"/> Family/Consumer Sciences |
| <input type="checkbox"/> French               | <input type="checkbox"/> German         | <input type="checkbox"/> Health Education | <input type="checkbox"/> Integrated Science*      |
| <input type="checkbox"/> Japanese             | <input type="checkbox"/> Language Arts  | <input type="checkbox"/> Marketing        | <input type="checkbox"/> Physics                  |
| <input type="checkbox"/> Russian              | <input type="checkbox"/> Social Studies | <input type="checkbox"/> Spanish          | <input type="checkbox"/> Speech Comm.**           |
| <input type="checkbox"/> Technology Education |   |   |   |

*\*Those with asterisk may be selected for Elem/Middle Level candidates. They must be combined with another endorsement if seeking the Middle and Secondary authorizations.*

*\*\*Drama and speech endorsements must be combined with another endorsement.*

*For Music, Art, and P.E. endorsements see section on next page.*

**Combined-Level Endorsements** (teach in two adjacent authorization levels)

- Early Childhood/Elementary Music     Early Childhood/Elementary Physical Education     Early Childhood/Elementary Art
- Elementary/Middle Level Music     Elementary/Middle Level Physical Education     Elementary/Middle Level Art
- Middle Level/Secondary Music     Middle Level/Secondary Physical Education     Middle Level/Secondary Art

**VII. Financial**

- Do you expect to file an application for financial aid?     Yes     No
- Are you a veteran?     Yes     No

**VIII. Testing Information**

State required exams include the CBEST or Praxis PPST, as well as the ORELA and/or Praxis II exams. Please tell us the month and year you took or plan to take the exam.

- |                    |                                |                                      |                |                  |
|--------------------|--------------------------------|--------------------------------------|----------------|------------------|
| I have taken the   | <input type="checkbox"/> CBEST | <input type="checkbox"/> Praxis PPST | On (date)_____ |                  |
| I plan to take the | <input type="checkbox"/> CBEST | <input type="checkbox"/> Praxis PPST | On (date)_____ |                  |
| I have taken the   | <input type="checkbox"/> ORELA | <input type="checkbox"/> Praxis II   | On (date)_____ | Subject(s) _____ |
| I plan to take the | <input type="checkbox"/> ORELA | <input type="checkbox"/> Praxis II   | On (date)_____ | Subject(s) _____ |

**IX. Applicant Admission Statement**

**Instructions for essay completion; please read carefully**

During graduate studies at George Fox University, students do a considerable amount of writing that must be done in accordance with university standards. This essay is evaluated as an indicator of your writing ability and readiness for a teacher education program. You are therefore encouraged to carefully compose and edit the essay in order to provide us with a sample of your best written communication. Besides clearly communicating your thoughts, pay careful attention to sentence and paragraph structure, as well as to the mechanical details of spelling, punctuation, and grammar.

***Essay assignment***

David Purpel, philosopher of education, writes, “The major question we need to ask educators is not ‘What is your philosophy of education?’ but ‘What is your philosophy of life and what are its ramifications for education?’” In a concise and well-written essay of not more than three double-spaced pages, please state your philosophy of life and its ramifications for education. Please enclose with the application. (If using the online application some of your formatting will be lost, we take that into consideration.)

**X. Educational and Social Philosophy**

George Fox University is a Christian university committed to intellectual and academic excellence. During the times you are a student on the George Fox campus or involved in a George Fox project off campus, you are expected to comply with and respect the spirit and intention of the George Fox University community (see online catalog).

Your completion of this application and your signature below indicate your willingness to cooperate and comply with the purpose and expectations of the University.

I authorize investigation of all information provided during the application process. References provided may give George Fox University any and all information requested, as well as any pertinent information they may have, personal or otherwise. I release from all liability or responsibility George Fox University, its agents, and all people, companies, or corporations providing information to the University about me.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

# GEORGE FOX UNIVERSITY

## PROFESSIONAL REFERENCE FORM

### *Master of Arts in Teaching*

This form is to be filled out by an individual who can attest to your work with young people preferably in a public school classroom. When not available, please consider professional references from an educator. It should not be completed by a member of your immediate family or personal friend.

#### **Section A: To be completed by applicant**

Applicant's name \_\_\_\_\_

Under the Family Educational Rights and Privacy Act of 1974 (Buckley Amendment), which gives students the right to inspect and review their educational records, students may waive their right to see specific confidential letters or recommendations. In the belief that applicants and the people from whom they request evaluations may wish to preserve the confidentiality of those evaluations, we are giving you an opportunity to sign one of the following statements:

1. I waive my right to examine this form.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

2. I do not waive my right to examine this form, and I authorize the person completing this form to provide a candid evaluation.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

#### **Section B: To be completed by reference**

1. How long have you known the applicant? How well? In what capacity?

2. What evidence have you observed of the applicant's leadership skills and abilities?

3. Do you believe this individual has an inquiring mind?

4. Evaluate the applicant's initiative and responsibility.

5. Has the applicant demonstrated skill in interpersonal communication? What is this person's influence on others?
  
6. How do you evaluate this person's interaction or work with young people?
  
7. How do you evaluate this person's character, ethics, and/or relationships, given your perception of requirements for a professional in the field of education?
  
8. Evaluate the applicant's present situation. Is the applicant demonstrating the aptitude and concern desirable in a professional educator?
  
9. As an aid to our evaluation of the applicant, we would appreciate any additional information you can provide in terms of specific strengths and weaknesses of the applicant.

**In consideration of the applicant's suitability for study and overall potential for success in an academic program, please check one of the following:**

- I highly recommend     
  I recommend     
  I recommend with reservation     
  I do not recommend

---

NAME (please print or type)

---

SIGNATURE

DATE

---

ADDRESS

DAYTIME TELEPHONE

---

POSITION

**Please return this form in a sealed envelope with your signature over the flap and either mail directly to**

- George Fox University (414 N. Meridian St. #6149, Newberg, OR 97132-2697) or return to the MAT applicant. You may also fax it ATTN: MAT Admissions at 503-554-3110.**

- For Boise candidates, mail to George Fox Boise Center (1810 S. Eagle Road, Meridian, ID 83642) or fax it ATTN: MAT Admissions at 208-375-3564.**

**Thank you for your assistance.**

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\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

2. I do not waive my right to examine this form, and I authorize the person completing this form to provide a candid evaluation.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

#### **Section B: To be completed by reference**

1. How long have you known the applicant? How well? In what capacity?

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\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

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\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

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# GEORGE FOX UNIVERSITY

## CHARACTER QUESTIONNAIRE

### TEACHER STANDARDS AND PRACTICES COMMISSION (TSPC)

Oregon Administrative Rules 584-020-0035 and 584-036-0060 require that students admitted to approved teacher-preparation programs provide evidence of good moral character necessary for certification in Oregon by responding to character questions asked by TSPC.

#### Applicant Information

Name \_\_\_\_\_ Date of birth \_\_\_\_\_  
LAST FIRST MIDDLE INITIAL

Social Security number \_\_\_\_\_ Gender:  Male  Female

Permanent home address \_\_\_\_\_

Authorization level sought:  Early childhood/Elementary  Elementary/Middle  Middle/Secondary

#### TSPC Character Questions

You must answer each question either "yes" or "no," whichever is true. Explain each "yes" answer in detail on a separate sheet.

##### Notes:

- \_\_\_\_\_ 1. Have you ever left any educational or school-related employment, voluntarily or involuntarily, while the subject of an inquiry, review, or investigation of alleged misconduct or alleged violation of professional standards of conduct or when you had reason to believe such investigation was imminent?
- \_\_\_\_\_ 2. Are you currently the subject of an inquiry, review, or investigation for alleged misconduct or alleged violation of professional standards of conduct?
- \_\_\_\_\_ 3. Have you ever failed to complete a contract for educational services in any educational or school-related position, or for any alleged misconduct or alleged violation of professional standards of conduct been placed on leave by your employer or left such employment prior to the end of the contract term?
- \_\_\_\_\_ 4. Have you ever had a professional certificate, credential, or license (of any kind) revoked or suspended, or have you been placed on probationary status for any alleged misconduct or alleged violation of professional standards of conduct?
- \_\_\_\_\_ 5. Have you ever been denied a professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct or alleged violation of professional standards of conduct?
- \_\_\_\_\_ 6. Have you ever surrendered a professional license of any kind before its expiration?
- \_\_\_\_\_ 7. Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure?
- \_\_\_\_\_ 8. Have you ever been convicted or been granted conditional discharge by any court for (a) any felony; (b) misdemeanor; or (c) any major traffic violation, such as: driving under the influence of intoxicants or drugs; reckless driving; fleeing from or attempting to elude a police officer; driving while your license was suspended, revoked, or used in violation of any license restriction; or failure to perform the duties of a driver or witness at an accident?
- \_\_\_\_\_ 9. Have you ever been arrested or cited for any offense listed in question 8 above which is still pending in the court?
- \_\_\_\_\_ 10. Have you ever entered a plea of guilty or "no contest" relative to any charge for an offense listed in question 8?
- \_\_\_\_\_ 11. Have you ever had any civil judgment or other court order entered against you resulting from abuse, assault, battery, harassment, intimidation, neglect, stalking, or other threatening behavior toward other people?

1. Any false statement knowingly made in this application is grounds for revocation or suspension of your license. If in doubt, disclose and explain rather than conceal. If you answer "no" to questions 8 through 11 based on an "expungement" order "setting aside" or "sealing" a record of a conviction or conditional discharge, you must personally verify with the court directly involved that the expungement, setting aside, or sealing actually has taken place. An erroneous belief that a conviction has been expunged, set aside, or sealed, when in fact it has not, will be deemed a false statement.

2. If you answer "yes," a certified true copy of the court record must accompany this application (if not previously submitted to the TSPC).

Check here if, for any "yes" answer, an explanation was provided with a prior application, in which case no further explanation is required at this time.

I hereby certify that the information submitted on or relating to this form is true and correct and grant the TSPC permission to check civil or criminal records to verify any statement made on this application. The commission may revoke any license upon evidence that the holder knowingly made false statements in the application for the license.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_



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