



GEORGE FOX
UNIVERSITY

SCHOOL OF EDUCATION

APPLICATION FOR ADMISSION

Elementary Education

Degree Completion Program

*George Fox University
Office of Admissions*

*414 N. Meridian St. #6149
Newberg, OR 97132-2697
503-554-2263 • 800-631-0921*

FAX 503-554-3110

teach@georgefox.edu

georgefox.edu/teach

GEORGE FOX UNIVERSITY

Elementary Education Degree Completion

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.
7. One official transcript from each college or university attended. (Forms are included for your use but ordering online may be more convenient). You may collect these in sealed envelopes and enclose with your application.
8. CBEST or Praxis PPST and ORELA scores.

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

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*).

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

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)

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.

V. References

Three references required. If possible, please list professional references who can attest to your work with young people. 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

Early Childhood & Elementary

ESOL Endorsement (optional)

Authorizations Defined

Early Childhood: age 3–grade 4

Elementary: grades 3–8 in an elementary school

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 CBEST Praxis PPST On (date) _____

I plan to take the CBEST Praxis PPST On (date) _____

I have taken the ORELA On (date) _____

I plan to take the ORELA On (date) _____

IX. Applicant Admission Statement

Instructions for essay completion; please read carefully

During 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 Question for admission

Write an essay that tells us about your current ideas regarding effective teaching and learning that produces growth in *all* students.

Your essay should be approximately two double-spaced typewritten pages. Please enclose with the application. (If using the online application some of your formatting will be lost and we take that into consideration.)

X. Educational and Social Philosophy

George Fox University is a Christian liberal arts 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

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 _____ Sex: Male Female

Permanent home address _____

Authorization level sought: Early childhood/elementary

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.

- | | |
|--|---|
| <p>_____ 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?</p> <p>_____ 2. Are you currently the subject of an inquiry, review, or investigation for alleged misconduct or alleged violation of professional standards of conduct?</p> <p>_____ 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?</p> <p>_____ 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?</p> <p>_____ 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?</p> | <p>_____ 6. Have you ever surrendered a professional license of any kind before its expiration?</p> <p>_____ 7. Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure?</p> <p>_____ 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?</p> <p>_____ 9. Have you ever been arrested or cited for any offense listed in question 8 above which is still pending in the court?</p> <p>_____ 10. Have you ever entered a plea of guilty or "no contest" relative to any charge for an offense listed in question 8?</p> <p>_____ 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?</p> |
|--|---|

Notes:

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

GEORGE FOX UNIVERSITY

PROFESSIONAL REFERENCE FORM

Bachelor of Science in Elementary Education: Degree Completion

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. The applicant demonstrates strong leadership skills and abilities.

Strongly agree Agree Disagree Strongly disagree

Comments:

3. The applicant gives evidence of an inquiring mind.

Strongly agree Agree Disagree Strongly disagree

Comments:

4. The applicant demonstrates initiative and takes responsibility when given the opportunity.

Strongly agree Agree Disagree Strongly disagree

Comments:

5. The applicant demonstrates good skill in interpersonal communication and has a positive influence on others.

Strongly agree Agree Disagree Strongly disagree

Comments:

6. The applicant demonstrates strong aptitude and skill in working and interacting with young people.

Strongly agree Agree Disagree Strongly disagree

Comments:

7. Given your perception of requirements for a professional in the field of education, the applicant demonstrates high quality of character, strong ethics and/or positive relationships.

Strongly agree Agree Disagree Strongly disagree

Comments:

8. Give your relationship with the applicant, the applicant is demonstrating the aptitude and concern desirable in a professional educator.

Strongly agree Agree Disagree Strongly disagree

Comments:

9. As an aide 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. Please feel free to include a letter of explanation or recommendation.

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 applicant. You may also fax it ATTN: Admissions at 503-554-3110.

Thank you for your assistance.

REQUEST FOR OFFICIAL TRANSCRIPT

Institution _____

Name _____
LAST FIRST MIDDLE

Name used when attending the institution listed above:

LAST FIRST MIDDLE

Social Security or ID number _____ Date of birth _____

Number of copies requested: For institution below _____ For student _____

Dates attended: From _____ To _____

Mail transcripts to: Office of Admissions, George Fox University • 414 N. Meridian St. #6149 • Newberg, OR 97132-2697*

Student address _____

A check for \$ _____ is attached to cover transcript fees. _____
STUDENT SIGNATURE

REQUEST FOR OFFICIAL TRANSCRIPT

Institution _____

Name _____
LAST FIRST MIDDLE

Name used when attending the institution listed above:

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Student address _____

A check for \$ _____ is attached to cover transcript fees. _____
STUDENT SIGNATURE

*Or, you may instruct the institution to mail originals to you. Keep them in the original sealed envelopes and submit to GFU with your application.



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