

## REGISTRY FOR EDUCATIONAL PERSONNEL ACADEMIC QUALIFICATION DETAIL

(Certification Data)

Name (please print) \_\_\_\_\_ Building \_\_\_\_\_ Dept \_\_\_\_\_

In an effort to determine if each staff member meets the “No Child Left Behind’ standards for “Highly Qualified Teachers”, it is necessary for us to survey staff as to their teacher preparation and continuing education background. This information is also needed for us to provide assistance to all our staff in meeting the standards for “HQ”. We appreciate your cooperation and assistance in helping us in this effort. Only teaching/instructional staff need respond (excludes social workers, psychologists, therapists and counselors)

### Bachelor’s Degree

Major(s)	College/ University	Year Grad	Grade Level(s)	Passed MTTC Test (since 1992)
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	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Minor(s)

	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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My initial Michigan recommendation for certification was issued by: \_\_\_\_\_  
College/University Year

My recommendation for certificate renewal was issued by: \_\_\_\_\_  
College/University Year

Master’s Degree: \_\_\_\_\_

Major: \_\_\_\_\_ College/University: \_\_\_\_\_

Content area: \_\_\_\_\_ Graduation Year: \_\_\_\_\_

	<i>Degree</i>	<i>Subject/Title</i>		
Additional Degree(s) _____	-in _____	University: _____	Year: _____	
_____	-in _____	University: _____	Year: _____	

Teacher Signature \_\_\_\_\_ Date \_\_\_\_\_