Application to Educator Preparation Faculty

Part A: Application

Date:

Name: email address: @uni.edu

Department: Campus extension:

Campus Address:

Membership Status—please check the category that best defines your role in educator preparation:

**Required Membership—VOTING:** I am a tenured/probationary (tenure-track) faculty member who:

_______ Regularly teaches Professional Education courses, methods courses in any College, or supervises Professional Education Sequence field experiences. Please list course numbers or describe supervision role:

**Voluntary Membership—VOTING:** I am a UNI employee outside the above areas who:

_______ Is involved in coursework in educator preparation, content-area coursework, research, academic advising, or administration, as well as term instructor, adjunct, and Professional and Scientific personnel, and others whose responsibilities make a significant contribution to the Educator Preparation program. Please list course numbers or describe your role:

**Affiliate Membership—NON-VOTING:** I am a UNI employee outside the above areas who:

_______ Is asking the Teacher Education Coordinators to add me to the EP-All electronic listserv.

Please go to Part B on back of this page

Part B: Representation Group Selection
Each member of the UNI Educator Preparation Faculty (EPF) belongs to a Representation Group for the purpose of functioning with the Educator Preparation Program Governance Structure. Each group has representation on either the Elementary Teacher Education Senate, the Secondary Teacher Education Senate, or the Graduate Council. EPF members receive ongoing communication and information from the Coordinators of Elementary and Secondary Teacher Education, the Faculty Senators representing each department, the Graduate Council member representing each Graduate Program, and the Chair of the Educator Preparation Faculty. Please select the group that most closely matches your representation and communication needs, based on your current assignment, or in the case of Academic Administrators/University Officials, your professional preparation:

______  **Professional Education Sequence, non-clinical** (for a complete listing of courses see: [http://www.uni.edu/teachered/professional-education-sequence-1](http://www.uni.edu/teachered/professional-education-sequence-1))

______  **Clinical Field Experience** (Level I, Level II, Student Teaching)

______  **Early Childhood**, including methods and Level III field experience

______  **Elementary**, including methods and Level III field experience

______  **Middle Level**, including methods and Level III field experience

______  **Secondary Education**, including methods and Level III field experience (Teacher Faculty, indicate your College: )

______  **Special Areas Education**, including methods and Level III field experience (Art, Music, Physical Education, Health)

______  **Special Education**

______  **Graduate/Licensure Program**

______  **Affiliate of Teacher Education** (support staff such as Professional & Scientific and Merit)

______  **Other**: Please describe

Information about UNI Teacher Education Program can be found at [http://www.uni.edu/teachered](http://www.uni.edu/teachered). Select “Information for Faculty” from the left-hand menu.

**Please return the completed form to:**
Office of Teacher Education--152 SEC (0602)