



**Chipola College**  
School of Education

**PROGRAM ELIGIBILITY CHECKLIST**

- Associate in Arts degree from a regionally accredited institution or at least 60 semester credit hours of postsecondary education with completion of the Chipola College general studies requirement.
- Completion of all lower-division mandated common prerequisites. See college catalog for freshman and sophomore requirements.
- Earned overall GPA of 2.5 in lower division coursework.
- Demonstrated proficiency in state mandated general knowledge content through satisfactory completion of all four (4) parts of the General Knowledge Exam.
- Complete a satisfactory background check by the Florida Department of Law Enforcement (FDLE) and the Federal Bureau of Investigation (FBI).  
\*\*The State of Florida requires that all school districts initiate a level II (FDLE and FBI) criminal background check on all adults who work in schools. Because all courses in education have a required school component, it is not possible to pass any of the courses if the student is blocked from entering schools.  
[http://www.fldoe.org/edstandards/background\\_screening.asp](http://www.fldoe.org/edstandards/background_screening.asp)
- Submission of completed Chipola College application and official transcripts to the Admissions Office.
- Submission of completed Baccalaureate Supplemental application with the following attachments:
  - A) Satisfactory brief narrative that includes a request for admission to the program, factors influencing the applicant's decision to teach, the applicant's philosophy of education, and previous teaching or related experiences which demonstrate the applicant's potential as an educator.
  - B) Completed recommendation form from three (3) individuals familiar with the applicant's academic work, personal character, and/or ability to work with children and/or youth.

**PLEASE PRINT, COMPLETE AND MAIL  
SUPPLEMENTAL APPLICATION  
TO  
Dr. Gina McAllister  
Dean, School of Education  
CHIPOLA COLLEGE  
3094 INDIAN CIRCLE  
MARIANNA, FL. 32446  
mcallisterg@chipola.edu**

Chipola College is an Equal Access/Equal Opportunity Institution. [www.chipola.edu/equity](http://www.chipola.edu/equity)

**Chipola College**  
*A Higher Degree of Success*  
Enrollment services/Admissions and Records Office  
3094 Indian Circle, Marianna, Florida 32446-2053  
(850)526-2761 [www.chipola.edu](http://www.chipola.edu)

Expected Term of Attendance		
Term	Month	Year
Fall	August	_____
Spring	January	_____
Summer I	May	_____
Summer II	June	_____

# Bachelor of Science Supplemental Application

Name \_\_\_\_\_ Social Security # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ ID# \_\_\_\_\_  
Last First MI Maiden (if applicable)

Mailing Address \_\_\_\_\_ Home Phone (\_\_\_\_\_) \_\_\_\_\_  
 \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_  
City State Zip Code

Primary Email Address: \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

ADMISSION INFORMATION	Select a Major
<b>1. Submit the following to the Admissions and Records Office:</b>	
Completed Chipola application. If you were not enrolled within the last year at Chipola College, you will need to submit a new application.	<input type="checkbox"/> B.S. Biology Education (6-12) <input type="checkbox"/> B.S. Elementary Education (K-6) <input type="checkbox"/> B.S. English Education (6-12)
A High School transcript denoting graduation and all college transcripts.	<input type="checkbox"/> B.S. Exceptional Student Education (K-12) <input type="checkbox"/> B.S. Mathematics Education (9-12)
<b>Submit the following to Dr. Gina McAllister</b>	<input type="checkbox"/> B.S. Middle School Mathematics Education (5-9) <input type="checkbox"/> B.S. Middle School Science Education (5-9)
Official passing scores on all four parts of the FTCE General Knowledge Exam.	Are you currently working as a paraprofessional in a school district? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which district:
Completed Baccalaureate Supplemental application	Are you currently taking classes at Chipola? <input type="checkbox"/> Yes <input type="checkbox"/> No
Narrative and three completed recommendation forms	Have you passed all sections of the General Knowledge Exam. <input type="checkbox"/> Yes <input type="checkbox"/> No

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[mcallisterg@chipola.edu](mailto:mcallisterg@chipola.edu)

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CHIPOLA COLLEGE  
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MARIANNA, FL. 32446**

**COLLEGE/UNIVERSITY RECORD**

Postsecondary Institutions Attended	City and State	Degree/Certificate Received (A.A., A.S., B.S., Diploma)	Credits Completed	G.P.A.
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I certify that the answers given herein are true and correct. I further understand that a false statement in this application or any admission document will subject me to penalties pursuant to 837.06, Florida Statutes; and is grounds for denial of admission or, upon further discovery grounds for dismissal and invalidation of college credit or degree based on such credit.

Applicant's Signature (ink) \_\_\_\_\_ Date \_\_\_\_\_



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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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Applicant's Signature (ink) \_\_\_\_\_ Date \_\_\_\_\_

### SOCIAL SECURITY NUMBER ACKNOWLEDGEMENT

In compliance with Florida Statute 119.071(5), Chipola College issues this notification regarding the purpose of the collection and use of your Social Security Number. The college collects your Social Security Number for use in the performance of the College's duties and responsibilities. To protect your identity, the College will secure your Social Security Number from unauthorized access. The College will never release your Social Security Number to unauthorized parties. Federal legislation relating to the Hope Tax Credit requires that all postsecondary institutions report the Social Security Number of all postsecondary students to the Internal Revenue Service. This IRS requirement makes it necessary for colleges to collect the Social Security Number of every student. A student may refuse to disclose his/her Social Security Number to the College but refusing to comply with the federal requirement may result in fines established by the IRS. In addition to the federal reporting requirements, the public school system in Florida uses the Social Security Number as a student identifier. This use is authorized by Florida Statute 229.559 and in School Code Section 1008-396. In a seamless K-20 educational system, it is beneficial for postsecondary institutions to have access to the same information for purposes of tracking and assisting students in the transition from one education level to the next. All Social Security Numbers are protected by federal regulations and are never released to unauthorized parties.

Questions about compliance with Title IX or a complaint regarding harassment or discrimination, including sexual harassment and sexual violence, should contact the College's Civil Rights Compliance Officer and Title IX Coordinator: Wendy Pippen, Associate Vice President of Human Resources, Civil Rights Compliance Officer and Title IX Coordinator, 3094 Indian Circle, Marianna, FL 32446, Building A, Room 183A, 850-718-2269, pippenw@chipola.edu

I acknowledge by my signature that I understand the College is collecting my Social Security Number for the purpose of complying with federal and state statutes related to employment, financial and academic assistance, and inter-institutional articulation or transfer, and that the College may disseminate that information in some communications with outside organizations, while taking precautions to safeguard use of the number. I certify that the answers given herein are true and correct. I further understand that a false statement in this application or any admission document will subject me to penalties pursuant to 837.06, Florida Statutes; and is grounds for denial of admission or, upon further discovery, grounds for dismissal and invalidation of college credit or degree based on such credit.

Applicant's Signature (ink)\_\_\_\_\_

Date\_\_\_\_\_

# **APPLICANT'S ACKNOWLEDGEMENT**

I understand and agree that I will be bound by the College's regulations as published in the college catalog and program syllabus/handbook.

I understand that by completing this application, I am not guaranteed admission into the program.

I certify that the information given in this application is complete and accurate and understand that any misrepresentation of facts may result in immediate dismissal from the program.

Acceptance and enrollment is based on the completion with a "C" or better of required courses that are in progress at the time of application. Chipola College reserves the right to make changes in the admission criteria as circumstances require. Every reasonable effort will be made to communicate changes in the program to interested students.

Students are strongly encouraged to investigate financial aid eligibility (Pell grants, etc.) at the time of application to the College and/or to the program. Deadline dates for completion of financial Aid are strictly adhered to and those dates can be found on the College Calendar. Students who wait until the time of college registration or until acceptance to the program are generally too late to qualify for funds for that term. Students need to be aware of financial aid limitations regarding minimum credit hours taken per term so that plans can be made to accommodate any adjusted financial resources. Information regarding assistance is available through Financial Aid. In addition to the tuition and fees, there are additional expenses such as textbooks and other course materials and uniforms, which may possibly not be covered by financial aid.

Please be advised that graduation from a Chipola College baccalaureate program requires that students demonstrate foreign language competencies. The Florida Department of Education has identified the competencies in the Florida Statue 1007.262 to be successful completion of two (2) credits of sequential high school foreign language instruction, successful completion of two (2) semesters of sequential postsecondary foreign language, or passing scores on the College Level Examination Program (CLEP) pursuant to paragraph 6A-10.024(6)(b), F.A.C.

I have read and understand the guidelines required for my acceptance into the School of Education Bachelor of Science program in Education.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Student ID Number