



Return hard copy documents to:
 Norfolk County Teachers Association
 500 N. Main Street, Unit B 2nd Floor
 Randolph, MA 02368

OR

Return scanned documents to:
 Debra Barrett, Director of Graduate Studies
 dbarrett@myncta.org

Application for Admission to Graduate Certification in Instructional Technology Proficiency (online)

Please check the appropriate certificate:

- | | | |
|---|--|--|
| <input type="checkbox"/> Assistive Technology | <input type="checkbox"/> Post Master's Certificate in Nursing Education | <input type="checkbox"/> Public Administration |
| <input type="checkbox"/> Assistive Technology with Advanced Internship | <input type="checkbox"/> Post Master's Certificate in Nursing Leadership | <input type="checkbox"/> Healthcare Administration |
| <input type="checkbox"/> Human Resource Management | <input type="checkbox"/> School Nutrition Specialist | |
| <input checked="" type="checkbox"/> Instructional Technology Proficiency (offered online) | <input type="checkbox"/> The Teaching of English as a Second Language | |
| <input type="checkbox"/> Merchandising | <input type="checkbox"/> Quality Assurance for Biotechnology | |
| <input type="checkbox"/> Post Baccalaureate Certificate in Business Administration | | |

A. Personal Information

Please Type or Print

Social Security Number: _____ **Date of Birth:** _____
 (Required upon enrollment for IRS tax-reporting purposes) Month Day Year

Legal Name: _____
 Last name/Surname First name Middle name

Other name(s) under which records may appear: _____
 (e.g., maiden name) Last name/Surname First name

Have you ever been convicted of a felony? Yes No If yes, please explain: _____

Mailing address: _____
 Number and Street

 City State Zip Code Country, if foreign

Telephone number: _____
 Area code + number

E-mail address: _____

Birthplace: _____
 City State or province Country, if foreign

Ethnic/Racial Background

- Are you Hispanic/Latino? Yes No
- What is your racial background? (Choose all that apply)

<input type="checkbox"/> American Indian/Alaskan Native	<input type="checkbox"/> Cape Verdean
<input type="checkbox"/> Asian	<input type="checkbox"/> Native Hawaiian/Other Pacific Islander
<input type="checkbox"/> Black/African American	<input type="checkbox"/> White

Citizenship (required)

- United States
- Permanent Resident
- Foreign (Country): _____
- Other (specify): _____

B. Education Graduate certificate students must have completed a bachelor's degree.

List all colleges, universities, graduate, and professional schools attended, including institutions where you have taken summer or evening courses, regardless of whether courses were completed or credit was received. Please submit official transcripts of all undergraduate and graduate work.

Name of School	Location (City and State)	Degree	Date of Graduation
1.			
2.			

Transfer Course

No transfer credit is allowed in this certificate program.

C. Employment Information

Employer	Position	Dates
1.		
2.		

General Information

ACADEMIC ADVISING

Academic Advisors are available during the evening to assist you in making decisions. Please call 508-626-4540 to schedule an appointment.

ADMISSION TIMETABLE

Applications are reviewed throughout the year. No application will be reviewed unless it is complete. Most students can begin in a fall, spring, or summer semester.

Application Checklist

- Signed application form
- Application fee - \$50.00 **WAIVED**
- Statement of Purpose **WAIVED**
- Official transcript(s) in sealed envelopes (Bachelor's Degree Transcript is sufficient)

SIGNATURE: All applications must be signed.

The University reserves the right to withdraw without notice any application which is not complete. All materials submitted become the property of the University. By my signature, I certify that the information I have provided about my academic and personal history and residency is accurate and complete. Failure to disclose any required information may result in denial of admission or retroactive administrative withdrawal from the University without refund or course credits.

I understand that information about applicants that is furnished to Framingham State University will be kept confidential and will only be released to public higher education system personnel and secondary school officials authorized to receive this information or to educational agencies and institutions for research purposes.

Applicant's Signature	Date
NOTICE TO STUDENTS:	
This bulletin/application is a guide for information and not a contract. The University reserves the right to change requirements for degrees, prerequisites, scheduling and all other information provided. The financial requirements of the University, legislative action and/or other circumstances may require adjustments to tuition and/or fees. The University reserves the right to make adjustments in these charges. Students acknowledge this reservation by submitting application for admission and/or by registering for classes.	
NONDISCRIMINATION POLICY:	
Framingham State University prohibits discrimination in education and employment on the basis of race, color, sexual orientation, religion, creed, disability, veteran status, age, national origin or marital status. The University is committed to providing fair treatment and equal opportunity in all aspects of the recruitment and admission of students through its policies and programs and as required by Federal and State laws and regulations. Inquiries regarding the application of these policies, laws and regulations may be referred to the Office of Affirmative Action/ADA Coordinator, Framingham State University, 100 State Street, P.O. Box 9101, Framingham, MA 01701-9101, or to the Office of the Assistant Secretary for Civil Rights, United States Department of Education, Washington, D.C.	

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APPLICATION DEADLINE: JUNE 16, 2017.
All application documents must be received by June 16, 2017 to be considered for admission to the program.