

**OGLALA LAKOTA COLLEGE  
EDUCATION DEPARTMENT**



**APPLICATION FOR OLC TEACHER TRAINING PROGRAM**

**Personal Information**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Employment Record**

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Hours worked per week: \_\_\_\_\_

Paraprofessional grade level experience(s): circle applicable K 1 2 3 4 5 6 7 8 9 10 11 12

Race/Ethnicity:(circle one) Native American/Alaskan Native Asian White

Native Hawaiian/Pacific Islander Black/African American Hispanic/Latino

**Academic Information**

**Degrees**(check all applicable)

High School Diploma \_\_\_\_\_ Associate's \_\_\_\_\_ Bachelor's \_\_\_\_\_

Master's \_\_\_\_\_ Other Certification \_\_\_\_\_

Number of Credit Hours Completed: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

Have you been on academic probation? \_\_\_\_\_ (Yes or No) If yes, explain on the back of this form.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do you have any special needs where accommodations will need to be made?** \_\_\_\_ (Yes or No, if Yes, please explain below):

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**OLC Program/Conditions** (check all applicable)

\_\_\_\_ Bachelor of Science Degree in K-8 Elementary Education w/ Middle Level

\_\_\_\_ Bachelor of Science Degree in Early Childhood Education (Indicate Program of Study)

\_\_\_\_ SD Teacher Certification Emphasis      \_\_\_\_ Head Start Emphasis

\_\_\_\_ Bachelor of Science Degree in K-12 Lakota Studies

\_\_\_\_ Bachelor of Physical Science Degree in 7-12 Secondary Education

\_\_\_\_ K-12 Exceptional Education Certification (for certified teachers only)

**GPA Requirement:**

I understand that I must maintain a cumulative GPA of 3.0 or better, and that all professional requirement grades must be a B or better to remain in the teacher training program and to be eligible for possible assistance.

(Initial here) \_\_\_\_\_

**Praxis II Content Knowledge Exam:**

Name of Exam Taken: \_\_\_\_\_

Date Exam Taken: \_\_\_\_\_

Score: \_\_\_\_\_ Passed/Not Passed: \_\_\_\_\_

I understand that I must take and pass the Praxis II Exam for acceptance into the teacher preparation program. I further understand I am responsible for all costs incurred to complete the exam.

(Initial here) \_\_\_\_\_

**Professionalism and Ethical Conduct:**

I understand that I must conduct myself in a professional manner to remain in the teacher preparation program. I further understand that I may be dismissed from the teacher preparation program for unprofessional conduct and/or violations of the SD Code of Ethics for Teachers.

(Initial here) \_\_\_\_\_

**Background Check and Drug Testing:**

For the safety of the students, most schools/school districts require that teacher candidates undergo a background check and/or drug test prior to being placed in a classroom for field-based experiences. The cost of the background check and/or drug test required by the school is the responsibility of the student teacher candidate.

I understand that I am responsible for all costs incurred to complete the background check and/or drug test required by my supportive school.

(Initial here) \_\_\_\_\_

**Criminal Record Check**

I understand that the South Dakota Department of Education will conduct a criminal background check when I apply for teaching certification upon receiving my degree. If I should have been convicted of a felony, crime of moral turpitude or narcotics use, I understand that I may not become certified to teach children within a school setting.

(Initial here) \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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Received in the OLC Education Department on: \_\_\_\_\_

By (name and title): \_\_\_\_\_