

**SOUTHERN OREGON UNIVERSITY
SCHOOL OF EDUCATION**

**APPLICATION FOR ADMISSION TO THE
CONTINUING ADMINISTRATOR LICENSE PROGRAM**

Name: _____ SOU ID#: _____

Address: _____

Phone: _____ Email: _____

1. Licensure: In order to qualify for the Oregon Continuing Administrator License, you will need a current Initial Administrator License. Please include a copy of your present license.

2. Have you ever been refused admission to or not completed a teacher education or administrator program? ____ Yes ____ No

Reason: _____

3. Goal Statement: With your application, please provide a clearly written goal statement (approximately 500 words) describing:

- Your academic administrative goals
- Your experience that illustrates your educational leadership

4. Professional Experiences in Education: Attach a resume that summarizes your professional experience in education or a related field. For each position provide the job title, a summary of the job responsibilities (including leadership experiences), the school, the district, and the dates of employment. We will use the information provided in your resume to verify your teaching and administrative experience.

5. Letters of Recommendation: Provide TWO letters of recommendation that, to the extent possible, are from:

- Your current or most recent supervisor /administrator
- Administrators who can speak to your experience as a school administrator

The Oregon Chief Education Office requires all teacher education programs to report the number of students from culturally and linguistically diverse backgrounds.

Is your first language something other than English: Yes No

Please check all that apply: Hispanic/Latino American Indian or Alaskan Asian Black or African American Native Hawaiian or other Pacific Islander White/Caucasian Other

Signature of applicant

Date