| Application for the Undergraduate Multiple Abilities Program | | |
|---|------------------------------|-------|
| Name: | | Date: |
| Local Address: | | |
| Home Address (if different): | | |
| | | |
| Local Phone: | Anticipated Graduation Date: | |
| Approximate GPA: | E-mail: | |
| Major: | | |
| Experience with teaching/working Example: Sunday School Teacher | g with children. | |
| | | |
| | | |
| | | |
| | | |
| | | |

Education & Computer Courses (Completed or Currently Taking)

Grade

Please attach all transcripts of all college work

I realize that MAP is a full-time, five semester program (including a *12-hour summer term) regardless of previous courses completed, and that admission to the Teacher Education Program is required to complete MAP. The statements on this application are true.

(Signed) *Financial Assistance may not pay for summer Interests/Hobbies unique experiences I've had that will enhance my teaching of children:

What personal qualities do you have that you think will make you a good teacher?

My personal beliefs about the role of school in the education of children with diverse needs (e.g., students with learning disabilities, special talents and gifts, learning differences, emotional conflicts):

Add information we should consider when reviewing your application:

Attach additional information if needed.

Email completed application to Mrs. Sharron Maughn: Smaughn@ua.edu