## **Arkansas Tech University**

## Undergraduate

## **Provisional License Recommendation**

Name:	Last 4 SSN
Email:	
The gra	iduate must have completed the following requirements for the one-year provisional :
To be	completed by the teacher candidate:
	Arkansas Child Maltreatment Registry Check Arkansas State Police and FBI background checks (Fingerprinting) Submit the Google document with the additional information that is downloaded with the application ote: Students are responsible to submit and pay for all background checks as well as to follow up with
	e appropriate agencies to ensure timely processing. DESE will not issue your license until the ockground check is cleared.
To be v	verified by Educator Licensure Office upon receipt of form:  Has graduated with a minimum of a Bachelor's degree in the Education Program/Content major Successful completion of required Praxis Subject Area Assessment(s) Completion of IDEAS professional development certificates
gradua	
Subject	s the applicant will teach
Grade l	evels the applicant will teach
Candid	ate employment date

Superintendent (or designee) printed name	
School District Name	
School Address and Phone number	
Superintendent (or designee) Signature	
	Date