

This form is only for those who are coming from another Educator Preparation Program.

**Part A: To Be Completed by the Candidate**

<b>TEA ID Number</b>								<b>Date of Birth: MM/DD/YYYY</b>							
Last Name				First Name				Middle Name				Maiden Name			
Transferring From: _____															
Transferring To: _____ (name of program)															
Reason for Transfer: _____ (name of program)															
Signed _____															
Candidate's Signature								Date							

**Part B: To Be Completed by the Current Educator Preparation Program**

Name of Original Entity								County-District (TEA) Number							
								--							
Candidate Identified as Completer: <input type="checkbox"/> No <input type="checkbox"/> Yes    Year: _____								Date Test Approval(s) Removed: _____							
Program Record:				Number of Coursework Hours Completed				Field Experience Hours Completed				Practicum Time Completed			
Is the candidate in good standing? <input type="checkbox"/> Y <input type="checkbox"/> N															
Name and Title of Program Administrator or Certification Officer				Date				Fax # / Email				Signature			
				MM	DD	YYYY	(    )								

**Part C: To Be Completed by the Educator Preparation Program Admitting the Candidate**

Name of Admitting Entity								County-District Number							
								--							
Area and Level of Certification Sought (include language area if appropriate)								Anticipated Completer Year							
Name and Title of Program Administrator or Certification Officer				Date				Fax # / Email				Signature			
				MM	DD	YYYY	(    )								

Instructions for Completion

### Purpose of Candidate Transfer Information:

The purpose of this form is to facilitate communication among the candidate and programs in the event of a desired change in program by the candidate. **CANDIDATES MAY NOT BE ENROLLED IN MORE THAN ONE PROGRAM AT A TIME.**

#### **Part A: To Be Completed by the Candidate**

- Print clearly in black ink.
- TEA ID Number: Do not place social security number in this space.
- Transferring From: Enter your current education preparation program's (EPP) official name.
- Transferring To: Enter the official name of the program you wish to be admitted.
- Reason for Transfer: Please detail the reason(s) for desiring to change programs.
- Sign/Date: Provide your official signature and date your request.
- Once you have completed your portion of the form, please mail, fax, or deliver to your current educator preparation program.

#### **Part B: To Be Completed by the Original Educator Preparation Program**

- Print clearly in black ink.
- Name of Original Entity: Place the official name of Entity as recognized by Texas Education Agency/The County-District (TEA Identification) Number.
- The candidate's status as a completer: If the person is not a completer, check NO and leave the rest of the information blank. Check YES if the candidate has been reported as a completer. Provide the year of completion and the certification area(s).
- Remove the candidate from your completer list on the ASEP database; remove any test approvals that you may have pending for that candidate. Enter the date of test approval removal.
- Program Records: Enter the number of coursework hours completed by the candidate. Enter the number of field-experience hours completed by the candidate. Enter the practicum time completed. The practicum time may be student teaching, clinical teaching, or internship. The time may be recorded in hours, days, months, or year(s). It is the entering educator preparations prerogative to accept any or none of the previous coursework, and field experience and request verification of completion from sending program.
- Type the name of the person providing the candidate information, date the application, enter contact telephone number/email in case of further questions, and provide an official signature.
- Once this information is completed, forward this form to the admitting entity.

#### **Part C: To Be Completed by the Educator Preparation Program Admitting the Candidate**

- Print clearly in black ink.
- Name of Admitting Entity: Please provide official name of entity recognized by Texas Education Agency/Provide your County-District (TEA Identification) number.
- If the candidate is listed as a completer, you should not accept the candidate in the same certification area.
- It is the entering educator preparation program's prerogative to accept any or none of the previous coursework, field experience and practicum and request verification of completion from the sending program.
- Check to ensure the original program has removed all test approvals; otherwise the candidate's scores will be credited to the original program.
- List the area and level of certification that the candidate will be pursuing in your program. If the program involves a Language, list the language. EX. Bilingual Generalist EC-6- Spanish
- List the anticipated completer year.
- Type the name of the person admitting the candidate, date the application, enter contact fax telephone number/email, and provide an official signature.
- Provide a copy to the candidate for his/her records.
- Place the original copy in the candidate's student folder for audit purposes.

**Note:** Send a copy of this form to your TEA Program Specialist only when the admitting program is not able to enter the candidate or after several attempts to contact the first program through the form or other method to see if the candidate was a completer. If this is not resolved at the program level, your program specialist will investigate and attempt to resolve the issue.