

## New Jersey Consortium for Urban Education

### A New Pathway to Certification:

#### Online Application for NJCUE Program

**Important! Please print and prepare this application before filling it out online. Once this application is submitted, you will not be able to edit or resubmit it.**

All fields with an \* asterisk are required.

\*Prefix:

Mr.  Ms.  Dr. or Other:

\*Last Name:

\*First Name:

Middle Name:

Maiden or previous name (if different than above):

\*Date of Birth (mm/dd/yyyy):

 /  / 

\*Gender:

Male  Female

\*Social Security or Student Identification Number:

 -  - 

#### \*PERMANENT ADDRESS

\*Street Address Line 1:

Street Address Line 2:

\*City:

\*State:

\*ZIP Code:

\*Country:

\*Telephone Number:

(  )

#### MAILING ADDRESS (if different from above)

Street Address Line 1:

Street Address Line 2:

City:

State:

ZIP Code:

Country:

Telephone Number:

(  )

E-MAIL ADDRESS:

Daytime Phone Number:

(  )

**BACKGROUND** *(this information is optional and used only for statistical purposes):*

Race *(check all that apply):*

- American Indian/ Alaskan Native
- Native Hawaiian or Other Pacific Islander
- Black or African American
- White
- Asian

Ethnicity *(check one):*

- Hispanic or Latino
- Not Hispanic or Latino

\*What language(s) do you speak in addition to English?

- None

List languages

**\*RESIDENCY**

\*Are you a United States citizen?

- Yes  No

\*Are you a Permanent Resident?

- Yes  No

**\*PRAXIS II SUBJECT ASSESSMENT**

- Taken  Will Take  /  (mm/yyyy)

Official passing Praxis II score is required for admission to NJCUE program. Test scores to be sent to New Jersey Department of Education at institution code 7666.

**\*EDUCATIONAL PREPARATION (List all colleges/universities attended)**

*Name of Institution	*Location	*From (mm/yyyy)	*To (mm/yyyy)	*Degree	*Major	Minor	*GPA
		<input type="text"/> /	<input type="text"/> /				

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> /	<input type="text"/> /	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> /	<input type="text"/> /	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> /	<input type="text"/> /	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> /	<input type="text"/> /	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> /	<input type="text"/> /	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> /	<input type="text"/> /	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**\*EMPLOYMENT RECORD (most recent first):**

*Dates	*Position Held	*Name of Employer	*Address of Employer
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**\*RECOMMENDATIONS**

All Students applying for **NJCUE** must submit two letters of recommendation from present or former employers or instructors who have first hand knowledge of their potential. Please provide the name, title, institution or company and phone number of the individuals who will be submitting letters of recommendation on your behalf.

1. \*Name:

\*Title:

\*Institution/Company:


\*Phone Number:

(  )

2. \*Name:

\*Title:

Please print the [Recommendation Form](#) and give a copy of it to each person you've asked for a letter of recommendation.



\*Institution/Company:

\*Phone Number:

(  )

**\*ESSAY**

Copy your essay. Then Paste it into the text field on the left.

In an essay of 2 - 3 pages, please address the following:

What interests you about the NJCUE program? What experiences, skills, knowledge and dispositions make you particularly suited to teaching in an urban community? In responding to these questions, please be sure to cite the experiences you have had working with children in any teaching or helping relationship such as tutoring, mentoring, coaching, care giving, or camp counseling.

NOTE: If you are applying for the program in Special Education, you must describe your experiences working with children or adults with special needs.

Submit Application

[contact us](#) | [privacy notice](#) | [legal statement](#)

