Master of the Arts of Teaching (MAT)
Application checklist

To be considered for admission, candidates must meet the following minimum requirements.
- Minimum undergraduate cumulative grade point average (GPA) of 3.0 or 3.0 GPA or twelve hours of graduate-level coursework with minimum GPA of 3.0
  - Candidates with a GPA of 2.7-2.9 may be considered for provisional admission.
- Positive recommendations
- Acceptable criminal background check

To complete your application packet, please assemble the following items.

- Application Form
- Salem College Honor Code Form
- Candidacy for Professional Licensure (CPL) Applicant Statement
- Background Check
- Contact Information for References
- Official electronic transcripts indicating the completion of a bachelor’s (four-year) degree should be sent directly from the undergraduate college or university to grad.admissions@salem.edu.

Please scan and email application materials to:
grad.admissions@salem.edu

Hard copy materials (e.g., transcripts) may be sent to:
Department of Teacher Education and Graduate Studies
Salem College
601 S. Church Street
Winston-Salem, NC 27101
Application for Admission
Master of the Arts of Teaching (MAT)

Date of Application: _________________________

First Name: ________________________________ Middle/Maiden: ________________________________ Last Name: ________________________________

Social Security # ____________________________ Birthday: ________________________________

Current Address: _________________________________________________________________

City: __________________________ County: __________________ State: _______ Zip: __________

Home Email: ____________________________ Other Email: ____________________________

Home Phone: ______________ Work Phone: ______________ Cell Phone: ______________

Gender: □ Female □ Male Marital Status: □ Single □ Married □ Other ______________

Citizenship: □ US Citizen □ Resident Alien □ Non-Resident Alien

Native Language: __________________________ Country of Birth: ______________________

Have you been a North Carolina resident for one year or more? □ YES □ NO if yes, county of residence: ______________________

Are you Hispanic or Latino? □ YES □ NO

Please select one or more: □ American Indian or Alaska Native □ Native Hawaiian or Other Pacific Islander
□ Asian □ White □ Black or African American

Do you plan to apply for financial aid? □ YES □ NO

Do you plan to apply for veteran’s benefits? □ YES □ NO

(If yes, please contact the Office of the Registrar at Salem College)

Specialty Program Desired (check one):
□ Elementary Education (K-6) □ Special Education (K-12) □ Art (K-12) □ French (K-12) □ Spanish (K-12)
□ Middle School English Language Arts (6-9) □ Middle School Mathematics (6-9) □ Middle School Science (6-9)
□ Middle School Social Studies (6-9) □ Secondary English (9-12) □ Secondary Mathematics (9-12) □ Secondary Science (9-12)
□ Secondary Social Studies (9-12)

Anticipated program start: □ Fall 20_______ □ Spring 20_________ □ Summer 20_______
**Educational Background:** List the colleges and universities that you have attended in reverse order along with the degrees and dates earned (if applicable). Please note that you must submit an official transcript from the institution that granted your bachelor's degree as well as one from any institution at which you have done other post-baccalaureate work.

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<tr>
<th>name/location of institution</th>
<th>dates attended</th>
<th>degree/ major</th>
<th>year awarded</th>
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**Starting with your current position, list your work history.**

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<tr>
<th>position held</th>
<th>company and location</th>
<th>dates worked</th>
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**Do you currently or have you ever held a teaching license?**

- [ ] NO  - [ ] YES

If yes, list below and submit a copy.

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<th>type</th>
<th>specialty area(s)</th>
<th>state of issue</th>
<th>expiration</th>
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By completing this form, I am making application to the Master of Arts of Teaching in the Department of Teacher Education and Graduate Studies at Salem College. I recognize that this is only an application and that I will not be considered officially admitted to phase 1 of the MAT program until I receive written notification. My signature on this document certifies that all information contained is- to the best of my knowledge- complete, correct, and true.

_________________________  ______________________
Candidate’s signature       date

Salem College welcomes qualified students regardless of race, color, national origin, sexual orientation, religion, or disability to all the rights, privileges, programs, and activities of this institution.

*Salem College is accredited by the Commission on Colleges of the Southern Association of Colleges and Schools (1866 Southern Lane, Decatur, Georgia 30033-4097) to award bachelor’s and master’s degrees. Teacher education programs are accredited by the National Council for the Accreditation of Teacher Education and are approved by the NC Department of Public Instruction.*
Please read and sign at the bottom to signify your intention to comply with the Salem College Honor Code and the registration policy. Submit this form with your application.

The Honor Tradition
The Honor tradition is a vital and unifying aspect of the Salem College community that encourages each member to ethical and responsible living. The Honor Code is upheld by the entire student body and stands on the principle of mutual respect. It is only as strong as the community that lives by it.

The Honor Tradition is long standing at Salem College and is highly respected by students, faculty, staff and administration. In keeping with its custom, each student assumes full responsibility for her/his actions in all phases of life at Salem. Such a tradition is only possible in a community that respects the individual and maintains a commitment to communication. Every student is responsible for encouraging other students to uphold the Honor Tradition.

The Honor Code
Salem College is a community of honor. I will show respect for my community by behaving with honesty, integrity and civility. As a responsibility to my honor community:

I. I will show respect for my classmates and faculty by maintaining honesty in my academic work and refraining from cheating.

II. I will show respect for my community and peers by maintaining integrity and honesty in my daily life and refraining from stealing and lying.

III. I will show respect for faculty, staff and members of the administration by maintaining civility and refraining from disruptive and abusive language and behavior.

I will acknowledge responsibility and accept the consequences of my actions. In choosing Salem College, I pledge to uphold the principles of the Honor Code and will cherish and guard its tradition.

Registration
I understand that I may add or drop a course any time from the opening of registration to the end of the Registrar’s Office business day on the last day of the drop/add period for a term (which for fall and spring terms is a one-week period as stated in the Term Schedules, and for the January term and summer terms is a shorter period of time as stated in those Term Schedules). I also understand that if I drop a class (or classes) after the last day of the drop/add period, I will owe for the class (or classes). If I have applied for financial aid for the term, I understand that I must inform the financial aid office if I decrease or increase the number of courses I have initially declared that I would be taking during the term.

Collection Agency Fees:
I understand and accept that if I fail to pay my account bill or any monies due and owing Salem College by the scheduled due date, and fail to make acceptable payment arrangements to bring my account current, Salem College may refer my delinquent account to a collection agency. I further understand that if Salem College refers my account balance to a third party for collection, a collection fee will be assessed and will be due in full at the time of the referral to the third party. The collection fee will be calculated at the maximum amount permitted by applicable law, but not to exceed (33.3%) of the amount outstanding. For purposes of this provision, the third party may be a debt collection company or an attorney. If a lawsuit is filed to recover an outstanding balance, I shall also be responsible for any costs associated with the lawsuit such as court costs or other applicable costs. Finally, I understand that my delinquent account may be reported to one or more of the national credit bureaus.

Print Name

Signature

Date

Revised Spring 2024
CANDIDATE FOR PROFESSIONAL LICENSURE (CPL)
APPLICANT STATEMENT

At the conclusion of your program, Salem College will recommend you to the North Carolina Department of Public Instruction for a professional teaching license. In order to ensure that such licensure will be forthcoming, please answer each question regarding your past conduct.

If you answer “yes” to any question, attach a detailed written explanation. If you answer “yes” to any question relating to a court proceeding, a certified true copy of the court record must accompany this statement.

CRIMINAL
1. Have you ever been, or are you currently being, investigated for alleged or suspected child abuse or neglect by any governmental agency? If yes, provide explanation and documentation. □ YES □ NO

2. Have you ever been convicted, pled guilty, or pled nolo contendere (no contest) to any criminal offense other than a minor traffic violation (criminal offense includes, but is not limited to a felony, a misdemeanor, or Driving While Impaired)? Please include any conviction, regardless of pardon. You must explain relevant circumstances in detail. NOTE: In response to this question, include all offenses other than minor traffic offenses. The following are not minor traffic offenses and must be listed: DWI, DUW, Failure to Stop in the Event of an Accident (hit and run), and Driving While License Revoked or Suspended (DWLR). If yes, provide explanation and documentation. □ YES □ NO

3. Have you ever received probation, deferred prosecution, or any type of pre-trial adjudication, including a PJC (prayer for judgment) other than for a minor traffic offense? NOTE: This question does not seek information about matters for which the records have been expunged by a court order. If yes, provide explanation and documentation. □ YES □ NO

4. Have you ever participated in a diversion program in lieu of prosecution? NOTE: This question does not seek information about matters for which the records have been expunged by a court order. If yes, provide explanation and documentation. □ YES □ NO

5. Have you ever been arrested, indicted, or otherwise charged with a crime other than for a minor traffic offense regardless of whether you were convicted or whether the charges were dropped? NOTE: This question does not seek information about matters for which the records have been expunged by a courts order. If yes, provide explanation and documentation. □ YES □ NO

6. Are you currently named in a pending criminal charge, indictment or special presentment of any offense other than for a minor traffic violation? (Special Presentment is used in some jurisdictions to charge an individual with a crime.) If yes, provide explanation and documentation. □ YES □ NO

PROFESSIONAL LICENSING
8. Have you ever had a professional certificate, credential, or license of any kind revoked or suspended, or surrendered one prior to its expiration? If yes, provide explanation and documentation. □ YES □ NO

9. Have you ever been reprimanded, censured, placed on probationary status or suspended by a licensing board, commission or agency for any alleged misconduct or alleged violation of professional standards of conduct? If yes, provide explanation and documentation. □ YES □ NO

Revised Spring 2024
10. Are there any pending adverse actions or investigations against you relating to a professional certificate, credential, or license in North Carolina, any other state or country? If yes, provide explanation and documentation. □ YES □ NO

11. Have you ever been denied a professional license for which you applied? If yes, provide explanation and documentation. □ YES □ NO

12. Have you ever been granted a professional license on a conditional or probationary basis for any alleged misconduct or alleged violation of professional standards of conduct? If yes, provide explanation and documentation. □ YES □ NO

13. Have you ever been disciplined by any board, commission, or agency responsible for licensure of any kind including, but not limited to, educational licensure? If yes, provide explanation and documentation. □ YES □ NO

**EMPLOYMENT**

For purposes of this statement, “misconduct” means the following:

- Conviction of a crime other than a minor traffic offense
- Use of excessive or inappropriate force against a minor that causes an observable physical injury
- Inappropriate interaction with a student of a sexual or romantic nature
- Theft, embezzlement or fraud related to school funds or property
- Illegal use of weapons or firearms on school property or at school-sponsored events
- Use of drugs or alcohol involving students
- Violation of the State Testing code
- Violation of the Code of Ethics
- Excessive use of alcohol or nonmedical use of a controlled substance as defined in Article 5 of Chapter 90 of the General Statutes, provided that there is a reasonable and adverse relationship between the underlying conduct and the continuing ability of the person to perform any of his/her professional functions in an effective manner

14. Have you ever been dismissed from employment by a school or school system for any reason, or been dismissed or had a contract non-renewed or non-extended by any employer for reasons of misconduct as defined above? (Non-extended means a contract or term of employment was not renewed.) If yes, provide explanation and documentation. □ YES □ NO

15. To your knowledge, have you ever had a disciplinary suspension, resigned, or been non-renewed or dismissed following allegations of behavior for misconduct related to your employment or arising out of your employment? NOTE: This question does not seek information about any suspension with pay or administrative leave for which the records have been removed from your Central Office personnel file. If yes, provide explanation and documentation. □ YES □ NO

16. Have you ever been, or are you currently being, investigated or charged by a licensing board, commission or agency with a violation of a Professional Code of Ethics or any similar code of conduct? If yes, provide explanation and documentation. □ YES □ NO

**MILITARY SERVICE**

17. Have you ever served in the armed services? □ YES □ NO

If yes, indicate dates of service: from _____________________ to _____________________ (DD/MM/YYYY)

18. Was your discharge honorable? □ YES □ NO

If yes, provide documentation. If not, state what your service characterization was and why.
19. Were you ever the subject of court martial charges, non-judicial punishment or otherwise disciplined while in the armed forces? If yes, provide explanation and documentation. ☐ YES ☐ NO

OATH
I hereby certify that the information submitted on or relating to this statement is true and correct. I grant the Department permission to check civil or criminal records to verify a statement made on this statement. I give the Department permission to request and obtain previous employment records to verify the above statements. I understand that any misstatement or omission of information may subject me to disqualification, revocation, and/or any other disciplinary action.

ETHICS STATEMENT
I hereby acknowledge that I have read, understand and agree to abide by the Code of Ethics for North Carolina Professional Educators and North Carolina Standards of Professional Conduct. 16 NCAC 6C.0601 and 16 NCAC 6C.0602 (available online or in the Office of Teacher Education and Graduate Studies)

PRINT NAME: __________________________________________________________________________
Signature ______________________________________________________________________________
Date ___________________________________________________________________________________
Field Experience and Supervised Internship

Completing the Teacher Licensure program at Salem College requires mandatory field experiences in local public schools and an entire semester in the classroom of a local public school for the practicum (student teaching).

Field Experience— All of the courses in the teacher licensure program require field experience. Field experiences for Salem College’s Department of Teacher Education are designed with intention to meet the needs of the course, expose students to diverse contexts and offer optimal learning opportunities throughout coursework. It is the responsibility of the student to complete all field experiences at the specified site for each course.

EDUC 599 Teachers as Practitioners— Supervised internship (student teaching) is required for all initial licensure candidates. This course and the seminar EDUC 594 Teachers as Practitioners must be taken alone. No other courses may be taken in the semester of student teaching. All state required tests must be passed prior to the student teaching semester.

I have read and understand the requirements for Field Experiences and the Supervised Internship.

Print Name  

Signature  Date
Process for Obtaining Confirmation of Background Check

Individuals currently employed with a public school system may use the process described below to provide Salem College Teacher Education and Graduate Studies office with necessary information rather than obtaining a new background check.

Contact your Human Resources representative. Request an email to be sent to Terri Collins that confirms that you are currently employed and have met requirements for hire including a background check.

Human Resources should send all material or questions to the following email address: terri.o.collins@salem.edu.

If you are not currently employed by a school/school district, please go to the Secure Applicant website to complete your background check information. You should be prepared to pay ($23.50) for your background check from this website.
Master of Arts in Teaching
Recommendation Form

Applicants, please list names, email addresses and relationship for two individuals who know your academic and professional abilities well (e.g., employer/supervisor, college professor, person in the teaching or helping professions, etc.).

1. Name of recommender: __________________________________________________________
   Email Address: _________________________________________________________________
   Relationship to applicant: _______________________________________________________

2. Name of recommender: _________________________________________________________
   Email Address: _________________________________________________________________
   Relationship to applicant: _______________________________________________________

I waive my right to see this letter of recommendation:

Applicant’s signature ___________________________  Date  _________________