

**SALEM STATE COLLEGE**  
Office of Licensure and Field Placement

**UNDERGRADUATE**  
**Intent to Apply for Educator Licensure**

Name: \_\_\_\_\_ SSC ID #: \_\_\_\_\_

S. S. #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

License Sought: \_\_\_Initial Field: \_\_\_\_\_ Grades: \_\_\_\_\_

**Requirements:**

*Degree Status:*

\_\_\_\_\_ I will complete my Baccalaureate Degree at SSC.  
Anticipated Completion Date: \_\_\_\_\_

*Practicum:*

\_\_\_\_\_ I completed an undergraduate student teaching assignment.  
Location: \_\_\_\_\_

*Application:*

\_\_\_\_\_ I applied online with the MA Department of Education for licensure  
on \_\_\_\_\_ **(COPY OF ONLINE RECEIPT ATTACHED.)**

\_\_\_\_\_ I do not intend to apply for licensure.

**REQUEST FOR OFFICIAL TRANSCRIPT:**

**I completed a Transcript Request Form on \_\_\_\_\_ and have forwarded a request and a  
(date)  
check for \$2.00 to the Salem State College Registrar's Office.**

**(The Registrar's office will not release an official transcript to the Office of Licensure and Field Placement for Teacher Licensure without the necessary request form and payment on file)**

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**Approval:**

*Candidate's file and transcripts have been reviewed.*

\_\_\_ *Qualifies for license specified*      \_\_\_ *Does not qualify for license*

*Licensure:* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Online endorsement for Licensure:* \_\_\_\_\_ *by:* \_\_\_\_\_

*Transcripts sent to MA DOE:* \_\_\_\_\_ *by:* \_\_\_\_\_

