

# TMATE

## Tarleton Model for Accelerated Teacher Education Tarleton State University Application Deadline: March 31

Please complete the Graduate Application and the TMATE Application  
and submit both with the non-refundable \$50 fee to the College of Graduate Studies.

Please select the location where you will complete your TMATE courses \_\_\_\_\_ Killeen \_\_\_\_\_ Fort Worth

Name \_\_\_\_\_ Prefer to be called \_\_\_\_\_  
LAST FIRST MIDDLE MAIDEN

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Permanent \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_  
(If Different)

Phone: Primary \_\_\_\_\_ Alternate \_\_\_\_\_

Email \_\_\_\_\_ How did you hear of TMATE? \_\_\_\_\_

Are you currently enrolled in a college or university? If so, where? \_\_\_\_\_

Please provide unofficial transcript or class schedule showing name of university to verify current enrollment.

Certification Area: \_\_\_\_\_  
1ST CHOICE 2ND CHOICE (OPTIONAL)

Have you previously made application to TMATE? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, when? \_\_\_\_\_

Have you previously applied to any other educator preparation program? Yes \_\_\_\_\_ No \_\_\_\_\_  
If admission was denied, or you did not complete the program, provide a statement of explanation on a separate sheet.  
Include admission date, dates of enrollment, name of program and program director, and reason for not completing.

Have you ever taught on an emergency or out-of-state certificate? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide the  
subject and grade taught: \_\_\_\_\_ Dates \_\_\_\_\_

School District \_\_\_\_\_ City, State \_\_\_\_\_

**References:** Both character and work references are **required**. You must notify the persons listed below that they will be contacted by the TMATE program. **All reference responses remain confidential.**

**Character References:** List below three persons who are **not** former employers or relatives.

Name	Mailing Address	City, State, Zip	Telephone w/area code
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\_\_\_\_\_  
MS - MR - DR

\_\_\_\_\_  
MS - MR - DR

\_\_\_\_\_  
MS - MR - DR

**Work References:** List your three (3) most recent work experiences. Begin with the most recent experience. Please provide full names and titles for your supervisors.

Supervisor \_\_\_\_\_ MS - MR - DR \_\_\_\_\_ Place of Employment \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
STREET CITY STATE ZIP  
Dates: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Manager/Supervisor? \_\_\_\_ Yes \_\_\_\_ No  
FROM: MO/YR - TO: MO/YR FROM: MO/YR - TO: MO/YR  
Description of Responsibilities \_\_\_\_\_  
Reason for leaving \_\_\_\_\_ Date we may contact current employer \_\_\_\_\_

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Supervisor \_\_\_\_\_ MS - MR - DR \_\_\_\_\_ Place of Employment \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
STREET CITY STATE ZIP  
Dates: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Manager/Supervisor? \_\_\_\_ Yes \_\_\_\_ No  
FROM: MO/YR - TO: MO/YR FROM: MO/YR - TO: MO/YR  
Description of Responsibilities \_\_\_\_\_

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Supervisor \_\_\_\_\_ MS - MR - DR \_\_\_\_\_ Place of Employment \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
STREET CITY STATE ZIP  
Dates: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Manager/Supervisor? \_\_\_\_ Yes \_\_\_\_ No  
FROM: MO/YR - TO: MO/YR FROM: MO/YR - TO: MO/YR  
Description of Responsibilities \_\_\_\_\_

List dates and describe all work or volunteer experiences in which you were actively involved with children.  
Continue on a separate sheet if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Criminal History Disclosure.** Pursuant to Texas Education Code §22.082, the State Board for Educator Certification (SBEC) shall obtain from any law enforcement or criminal justice agency all criminal history record information that relates to an applicant for or holder of a certificate issued under Subchapter B, Chapter 21. SBEC may refuse to confer state certification based on such criminal history information. Applicants must submit fingerprints to SBEC for review before any certification will be issued. For more information, please visit Fingerprinting for Texas Educators and School District Personnel on the TEA website: [www.tea.state.tx.us](http://www.tea.state.tx.us).

Pursuant to Texas Education Code §22.083, a school district and private school may access any criminal history information pertaining to you and held by any law enforcement or criminal justice agency. A school district or private school may refuse to employ you based on your criminal history. A school district or private school must report to the State Board for Educator Certification if the school district or private school obtains or has knowledge that an applicant or holder of a teaching certificate has a criminal history.

**Items to submit to the College of Graduate Studies:**

1. Application for Graduate Studies
2. \$50 non-refundable fee
3. TMATE Application
4. Official transcript from each institution of higher education
5. GRE scores

A Field-Based Experience Packet will be mailed when your application has been reviewed.

False or misleading information constitutes grounds for denial of approval to begin coursework or dismissal from the TMATE program

**Acknowledgements**

Please read carefully the following statement before signing:

My signature below indicates that:

1. I understand that all documents are to be turned in on time
2. Files that are not complete will not be considered for admission
3. The information I have provided on all forms is, to the best of my knowledge, the truth.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I understand that admission to the TMATE program is highly competitive. Meeting or exceeding minimum admission standards as outlined on the website does not in any way imply or guarantee admission to the program.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Please send completed TMATE Application to      Tarleton State University  
   College of Graduate Studies  
   Box T-0350  
   Stephenville TX 76402**