TRANSCRIPT EVALUATION REQUEST FORM
ILLINOIS EDUCATOR PREPARATION SPECIAL EDUCATION PROGRAM

INSTRUCTIONS: If you wish to request a transcript evaluation for Trinity’s Adult Studies programs, please complete the information below. Please submit this form, along with the application enclosed in your packet, your $25 application fee, and your transcripts. All evaluations will be completed at a later date and you will be notified of the results.

STEP 1:  NAME: ___________________________________________  ___________________________________________  ___________________________________________
First  Middle  Last  Maiden

STEP 2:  Please list your address, phone number and email address:
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

STEP 3:  List the name(s) of the College/University you have attached transcripts for:
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

STEP 4:  Please indicate one of the following grade levels for your Professional Educator license:
□ Elementary (K-9) / Special Education
□ Secondary (6-12) / Special Education
□ K-12 Specialist / Special Education

STEP 5:  Please circle your Major or Specialization as appropriate below:

IF YOU CHOSE SECONDARY EDUCATION, CIRCLE ONE MAJOR FROM THE LIST BELOW:
Biology  Business Education  Chemistry
English  History  Mathematics

IF YOU CHOSE K-12 SPECIALIST, CIRCLE ONE SPECIALIZATION FROM THE LIST BELOW:
Art  Music  Physical Education  Spanish

SIGNATURE: ___________________________________________  DATE: __________________________