Teaching Certificate Requirement Verification

Degree Objective: M.S. in School Counseling at Nova Southeastern University

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Last name, first name (please print) Date

Please check the box that applies to you:

☐ This is to acknowledge that **I currently hold** a valid Florida teaching certificate. A copy of my certificate is included with my application materials.

☐ This is to acknowledge that **I do not hold** a valid Florida teaching certificate. I understand that in order to graduate from this program and for my degree to be conferred, I must fulfill additional course requirements and the successful passing of the three sub-tests of the Florida Teacher Comprehensive Exam. In particular, I acknowledge that if admitted to the School Counseling program, I must successfully pass all four sections of the General Knowledge Test (one of three sub-tests of the FTCE) by the completion of the first four graduate courses..

I will contact the Florida Department of Education for information on current certification requirements as this might impact receipt of Florida Certification in School Counseling.

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Applicant's Signature

Please sign and return to:

Nova Southeastern University
EPS
Attn: Center for Psychological Studies
P.O. Box 299000
Fort Lauderdale, FL 33329-9905
Or Fax to: 954-262-3608 or 3609