

**Nova Southeastern University
Department of Counseling**

Teaching Certificate Requirement Verification

Degree Objective: **M.S. in Counseling, School Counseling Concentration**

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 professional teaching certificate and a copy of my certificate will be submitted to the program office by the start of the term.

- This is to acknowledge that **I do not hold** a valid Florida professional 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 Certification Exam (FTCE) including the General Knowledge Test (GTK); Professional Education Test; Subject Area Exam-Guidance and Counseling PK-12. In particular, I acknowledge that I must successfully pass all four sections of the General Knowledge Test (GKT) or General Record Exam (GRE) by the completion of the first four graduate courses (or first two semesters).

As state requirements are subject to change, I will contact the Florida Department of Education (FLDOE) for eligibility requirements.

Student's Signature

Please sign and return to:

Nova Southeastern University
College of Psychology
Enrollment Processing Center, Department of Counseling
3301 College Avenue
Fort Lauderdale, Florida 33314
Fax: 954-262-3608