

INSTITUTION



100 North First Street, E-240
Springfield, Illinois 62777-0001

EDUCATOR PREPARATION PROVIDER VERIFICATION OF INDIVIDUALIZED PATHWAY TO LICENSURE

EDUCATOR EFFECTIVENESS DEPARTMENT

DATE

Educator preparation providers shall use this form when honoring prior learning assessments or other alternative means in place of coursework required as part of a licensure program. The form should be verified by the licensure officer or department dean and uploaded to the educator's ELIS account prior to program completion.

EDUCATOR NAME	EDUCATOR IEIN	
FORM COMPLETED BY (NAME)	POSITION TITLE	
COURSE CREDIT APPROVED BY (NAME)	POSITION TITLE	
EXAI	MPLE	
PROGRAM NAME Elementary 1-6 Undergraduate		
COURSE CREDITED ESP 100 Earth-Space Science	ALTERNATIVE MEANS Bachelor's degree in a science field	
RATIONALE FOR ACCEPTANCE (Include how competencies were assessed and proficiency determined.) The candidate's bachelor's degree in a science field was honored as evidence of proficiency in this course because The following process was used to determine candidate proficiency in this course		
PROGRAM NAME		
COURSE CREDITED	ALTERNATIVE MEANS	
RATIONALE FOR ACCEPTANCE (Include how competencies were assessed and proficiency determined.)		

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