

California State University, Bakersfield
Teacher Education Department
Exceptional Admit Application

Name: _____ CSUB ID: _____ Date: ____/____/____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____

C.S.U. campuses are permitted to admit a limited number of students as *Exceptional Admits* on one or more requirements. The intent of this option of admission is “to provide for students who demonstrate particular strength in the qualities and characteristics sought for public school teaching,” but who do not presently meet all requirements. If you wish to be considered for Exceptional Admission, please complete **ALL** questions on this form and submit it to the Credentials Office with your transcripts. The Exceptional Admission (if approved) is **valid** for one semester only.

I. PLEASE ANSWER ALL THE QUESTIONS

Your goal in this section of the application is to provide evidence that you are eligible to be considered for the Exceptional Admission under the exceptional admit status.

- A. Have you ever been denied admission to CSU Bakersfield’s Teacher Preparation Program? Yes No
 If yes, which program: Single Subject Multiple Subject
 Please check the semester of your most recent denial and fill in the year: Fall Spring 20____

- B. Please check all that apply.

CSET: Multiple Subject Single Subject, content area: _____

Subtest I	Passed	Not passed	Registered
Subtest II	Passed	Not passed	Registered
Subtest III	Passed	Not passed	Registered
Subtest IV	Passed	Not passed	Registered

CBEST: Passed Not Passed Registered

GPA below 2.75, last 90 qtr. units/60 semester units

Foundation class(es): _____ Completed Registered

II. PLEASE PROVIDE ALL REQUESTED DOCUMENTATION

Provide a well-written statement explaining each bullet below:

- The reason(s) for Exceptional Admit Request. This explanation should include your plan/timeline for meeting the requirements e.g. if it is necessary for you to take CSET/CBEST exams. Have you passed the exam(s), if not, what sections are you registered for and what are those registration dates?
- The extent and nature of experience you have working with students
- Unique talents/qualities/experiences (i.e., a strong math or science background, multilingual abilities) that you have which may be useful in a classroom setting
- What you have done to strengthen your skills since your last application (if you have applied for and been denied from the program previously)

III. Attach a recommendation letter from an individual who has observed your work with students.

You must turn in this form with your supportive documentation by the due date for the application. (If your file is not complete that day, it will not be reviewed by the committee and you will not be considered for admission under exceptional admit status). Be sure to sign this form and include it with your application.

Applicant Signature

For Office Use Only

_____ GPA as of _____ Verified by: _____

_____ Approved _____ Denied Date: _____

 Director Signature