

## CONTENT KNOWLEDGE VERIFICATION

This form allows a teacher candidate to begin student teaching with PLACE or PRAXIS scores below the passing level. UNC WILL NOT RECOMMEND ANYONE FOR LICENSURE in Colorado or any other state without passing the appropriate PLACE or PRAXIS exam. The teacher candidate should return a copy of this form **and the failed exam results** to the School of Teacher Education in order to be permitted to student teach.

### 1. Completed by student:

**Student name** (Last, First): \_\_\_\_\_

**Bear number** \_\_\_\_\_

**Major / content area:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Africana Studies | <input type="checkbox"/> English          | <input type="checkbox"/> Physical Education |
| <input type="checkbox"/> Art              | <input type="checkbox"/> French           | <input type="checkbox"/> Physics            |
| <input type="checkbox"/> Biology          | <input type="checkbox"/> Geography        | <input type="checkbox"/> Social Science     |
| <input type="checkbox"/> Chemistry        | <input type="checkbox"/> German           | <input type="checkbox"/> Spanish            |
| <input type="checkbox"/> Communication    | <input type="checkbox"/> Hispanic Studies | <input type="checkbox"/> Special Education  |
| <input type="checkbox"/> Early Childhood  | <input type="checkbox"/> History          | <input type="checkbox"/> Theatre Arts       |
| <input type="checkbox"/> Earth Science    | <input type="checkbox"/> Mathematics      |   |
| <input type="checkbox"/> Elementary       | <input type="checkbox"/> Music            |   |

### 2. Completed by Major Program Coordinator:

*By signing the form I verify that despite failing the licensure exam, the student named above has demonstrated strength in content knowledge sufficient to proceed to student teaching. Rationale:*

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Coordinator's last name (Please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_