

# Summer Teacher Institute Application

## Summer 2023



WASHINGTON  
ADVENTIST UNIVERSITY  
SCHOOL OF GRADUATE AND PROFESSIONAL STUDIES

Please submit your application typed or printed legibly.

### PERSONAL DATA

Highest Degree Received:

From Where:

Social Security number:

or WAU ID#:

Last name:

First name:

Maiden name:

Street Address:

City:

State:

Zip Code:

Telephone Number:

Home

Work

Cell

Email:

**Admission is granted without regard to race, gender, disability, or national origin.**

Gender

Marital Status:

Female  Male

Single  Married  Other

Date of Birth:

Religious Affiliation:

Citizenship

Permanent Resident Alien Registration #

Race: U.S. Citizens and Permanent Residents only:

Asian/Pacific Islander

Hispanic

White/Non-Hispanic

Other

Black/Non-Hispanic

American Indian/Alaskan

Race/Ethnicity Unknown

Country of Residence:

Visa Type:

Country of Birth:

Native Language:

### FINANCIAL INFORMATION

Financial responsibility rests with the applicant. Please indicate how billing should be directed:

Myself  Sponsor:

Cost Covered by Sponsor:

Tuition

Fees

A letter from your conference/sponsor indicating the percentage to be paid must accompany your application. Balance not covered by your conference/sponsor must be paid at time of application. The sponsor letter must include the following:

Your name or Name of Organization

Billing Address

City

State

Zip

Have you attended WAU before:  No  Yes If yes, please give date last attended

Your name on WAU

records:

\*Complete the attached transcript request form, and return it with your application. Official transcript requests will be sent to CUC after grades are submitted, and after full payment is received.

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## Summer 2023

Please indicate session & course of interest



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SCHOOL OF GRADUATE AND PROFESSIONAL STUDIES

### SESSION I - PORTFOLIO: (MAY 29 TO AUGUST 4) \*APPLICATION DEADLINE DATE: MAY 15th

- EDEC 205 Materials and Methods for Early Childhood Education (3 hours)
- EDEC 306 Methods of Religious Instruction for Young Children (3 hours)
- EDEC 308 Early Childhood Social Studies Methods (2 hours)
- EDEC 322 Early Childhood Mathematics Methods (3 hours)
- EDEC 323 Material and Methods for Teaching Science in Early Childhood (3 hours)
- EDSP 440 Instructional Methods for Students with Disabilities (3 hours)
- EDUC 305 Elementary Health/Science Methods (3 hours)
- EDUC 308 Elementary Social Studies Methods (2 hours)
- EDUC 312 Methods of Religious Instruction for Young Adults (3 hour)
- EDUC 321 Techniques for Integrating Educational Technology into the Classroom (3 hours)
- EDUC 322 Elementary Mathematics Methods (3 hours)
- EDUC 345G Secondary School Religion Methods (3 hours)
- EDUC 351 Materials and Methods for Assessment and Instruction of Reading and Language Arts (3 hours)

### SESSION II : (JUNE 12 TO JUNE 23) \*APPLICATION DEADLINE DATE: MAY 29th

- EDEC 302 Administration of Early Childhood Programs (2 hours)
- EDSP 425 Applied Measurement and Assessment for Exceptional Students (2 hours)
- EDUC 120 – Historical and Philosophical Foundations of Education and Trends (2 hours)
- EDUC 297 Issues in Multicultural Education (2 hours)
- EDUC 341 Processes and Acquisition of Reading (3 hours)
- EDUC 365 Methods of Teaching Reading in the Secondary Content Area I (3 hours)
- EDUC 424 Educational Assessment (3 hours)
- PSYC 210 Developmental Psychology (3 hours)
- RELB 160 Jesus and the Gospels (3 hours)
- RELT 190 Ellen G. White and the Gift of Prophecy (3 hours)

### SESSION III (JULY 10 TO JULY 21) \*APPLICATION DEADLINE DATE: JUNE 26th

- EDUC 320 Classroom Management (2 hours)
- EDUC 340 Mat and Meth for Secondary Teaching (3 hours)
- EDUC 366 Methods for Teaching Reading in the Secondary Content Area II (3 hours)
- EDUC 313 Education of Exceptional Children and Youth (3 hours)
- HLSC 110 Healthier Living (2 hours)
- PSYC 494 Topics: Educational Psychology (3 hours)
- RELT 250 Principles of Christian Faith (3 hours)
- RELT 270 Adventist Heritage and Mission (3 hours)

## Student Agreement

I certify that the information given in this application is true and correct to the best of my knowledge. I understand that knowing and withholding or misrepresenting information may result in cancellation of my registration.

My signature also confirms that I am fully responsible for all tuition and expenses.

Signature of Applicant

Date

Please email completed forms to: [ccogen@wau.edu](mailto:ccogen@wau.edu)

**Ms. Carol Cogen**

**Program Coordinator**

Washington Adventist University

School of Graduate and Professional Studies (SGPS)

7600 Flower Avenue Takoma Park, MD 20912-7796

# Transcript Request

 7600 Flower Avenue  
 Takoma Park, MD 20912-7796  
 FAX: 301-891-4121

- **Requests will NOT be processed without a signature.**
- We do NOT process same day.
- Transcripts will be processed within 3-5 business days.
- Students prior to 1990, allow more than 5 business days processing
- You must have a financial balance of **zero**.
- Requests will **NOT** be processed without payment. We do **NOT** accept checks.
- Submit this form via email ([transcripts@wau.edu](mailto:transcripts@wau.edu)), mail, or at our front desk.

### Please Fill Out Form Completely and Clearly

Student Name: \_\_\_\_\_

Name when attending WAU: \_\_\_\_\_

Type of Student (If Applicable): \_\_\_\_\_

 Congress  Newbold  Dual Credit  Consortium  Radiography (Washington Adventist Hospital)

 WAU ID# **or** last four digits of SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Best Contact Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Year of last attendance at WAU: \_\_\_\_\_

 Hold until grades are entered at the end of semester?  Hold until graduation date is conferred? 
**Check one:**  **Pick up (Will not be released without ID)**  **Mail to address(es) below**
**Mail to Address 1**  
 Name/Org: \_\_\_\_\_

Street: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

**Mail to Address 2**  
 Name/Org: \_\_\_\_\_

Street: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email for Unofficial to be sent to: \_\_\_\_\_

Note: Official Transcripts cannot be sent by electronic means; only Unofficial copies

**Payment:**  Cash  Credit Card  Money Order

Transcript Item	# of Items	Cash	Credit card/ Money order	Cost
Official Transcript		\$5	\$6	
Unofficial Copy		<b>NO CHARGE</b>		
			<b>Total:</b>	

**All transcripts are mailed via standard USPS. No expedited shipping available.**
**For Credit Card Use Only:**

Card Number: \_\_\_\_\_

Card Expiration Date (mm/yy): \_\_\_\_ / \_\_\_\_

Name on card: \_\_\_\_\_

CVV (3 digit security code) \_\_\_\_\_

Signature: \_\_\_\_\_ Date of Request: \_\_\_\_\_

*(required)*