



Teacher Education Accreditation Council

APPLICATION FOR THE TEACHER EDUCATION ACCREDITATION COUNCIL, INC. Candidate status 2010-2011

To qualify as a candidate, the professional education program must meet the eligibility requirements outlined in TEAC's *Guide to Accreditation* or on TEAC's website, www.teac.org. Applicants agree to abide by the TEAC principles of quality, bylaws, and rules and regulations. The application requires the approval of the faculty and administration of the educator preparation unit, the institution's chief academic officer, and the institution's president/CEO.

1. Institution Name _____

Address _____

City _____ State _____ Zip code _____

<http://www> _____

2. Total Institutional Enrollment _____ Year Founded _____

3. Institutional Affiliation Public _____ Independent _____ Tax Assisted _____

4. Administrative Officers

President/CEO Name _____

Title _____ E-mail _____

Phone _____ Fax _____

Vice President for
Academic Affairs

Name _____

Title _____ E-mail _____

Phone _____ Fax _____

Education Unit
Administrator

Name _____

Title _____ E-mail _____

Phone _____ Fax _____

5. Enrollments and number of faculty in each professional education program:

Programs	Students		Faculty	
	Undergraduate	Graduate	Full	Part-time
Teacher Education				
Administration				
Counseling				
School Psychology				
Other				
Totals				

6. Regional or Other Accrediting Agency _____
 Specialized Accrediting Body (ies) _____

7. Documentation that contains the following information:
 a. Evidence that graduates satisfy state licensure or other requirements for teaching public or private P-12 schools
 b. Copies of current catalogs and other descriptive publications, including the academic calendar
 c. Copies of the latest accreditation reviews (regional and program)

8. Application fee of **\$2,862*** payable to the Teacher Education Accreditation Council, Inc. Please mail to the following:

**Teacher Education Accreditation Council, Inc.
 Suite 101
 Willard Hall Education Building
 Newark, DE 19716**

Dean, Chair, or Division Head of the Educator Preparation Unit _____
Date

Chief Academic Officer on behalf of the Educator Preparation Faculty & Administration _____
Date

President/CEO on behalf of the institution's support to the Educator Preparation Program _____
Date

Thank you

*An annual percentage increase of the dues will equal the higher education inflation index (HEPI).