



# Teacher Education Accreditation Council

## APPLICATION FOR THE TEACHER EDUCATION ACCREDITATION COUNCIL, INC. Affiliate status for organizations 2010 - 2011

To qualify as an affiliate member, the professional education program must meet the eligibility requirements outlined in TEAC's *Guide to Accreditation* or on TEAC's website, [www.teac.org](http://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. An institutional affiliate member of TEAC is not a candidate for accreditation.

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				
<b>Totals</b>				

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 \$68\* 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 Teacher 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).